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ABSTRACT

Presented is Volume 1 of a final report on a project to determine policies likely to result in maximized adoptive placements for mentally, emotionally, or physically handicapped children. It is explained that 205 foster care and adoption workers and 79 agency directors in six states (Indiana, Michigan, Ohio, Alabama, Georgia, and North Carolina) were surveyed concerning their current practices. The project's background goals, methodology, and research techniques are described; and a detailed analysis is provided of such aspects as the agencies' attitudes, procedures, and programs for placing handicapped children as well as the characteristics, attitudes, and interaction patterns of four categories of adoption workers or supervisors. (LH)

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ANALYSIS OF AGENCY PLACEMENT OF HANDICAPPED CHILDREN

FINAL REPORT

VOLUME I

Bruce L. Warren, Ph.D. Project Director
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Department of Sociology
Eastern Michigan University
1974

Project #OCD.CB.289 funded by The Children's Bureau - Office of Child Development, HEW.

EC073147

Department of Sociology
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July, 1974

To The Office of Child Development:

The funds granted Eastern Michigan University #OCD.CB.289 were expended between July 1, 1972 and June 30, 1974 to accomplish the following objectives:

1) Design and implement a number of data collection techniques to gather data on agency placement of handicapped children with special emphasis on the success of innovative practices in this area.

2) Analyze the data to evaluate those practices and policies that appeared most effective in increasing the number of placements.

3) Organize a workshop for child welfare agencies that would disseminate some of the insights of the project and introduce workers to innovations.

4) Develop a handbook to further disseminate the project findings especially those most useful for workers placing handicapped children in adoptive homes.

The following report describes the way in which project objectives were met, presents the results of data analysis to date, and evaluates the success of the project in meeting its original objectives.

Estimated total expenditures for the duration of the project were $47,000, $45,000 awarded by the Office of Child Development and $2,000 as Eastern Michigan University's cost sharing. Professional reimbursed man years was .75 years.

Respectfully submitted,

Bruce L. Warren, Ph.D.
Patricia R. Ferman, Ph.D.

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The authors wish to express their appreciation and gratitude to the many people who contributed to various aspects of the project. We are especially indebted to the hundreds of child welfare agency personnel, adoptive parents, and child care workers who contributed their valuable time in interviews and filling out questionnaires. Their insights and the fine work they are doing in serving children is the basic focus of this project.

Ursula M. Gallagher, Children's Bureau, wrote the foreword to the handbook. She and Cecilia Sudia, our project officer at the Office of Child Development, provided consistent help and support at every stage of the project--encouraging the initial planning and critically reviewing the final draft of the handbook. Our Workshop Advisory Board: Jane Costabile, School of Social Work, University of Michigan, Kay Donley, Spaulding for Children; Joan and George Perros, adoptive parents; and Frank Wawrzaszek, Department of Special Education; Eastern Michigan University, consistently encouraged us and contributed substantially to the scope of the project and each of its phases.

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include their pictures in the handbook and share their experiences with adoption. The staff of Information Services prepared the handbook for printing and designed the cover and format.

The project rested heavily on the efforts of Mary Lohman who contributed to the coordination of the project and took major responsibility for assuring that as many interviews as possible were completed and recorded. Mary Ridley and Pearl Levy donated time to the project and substantially expanded the results. Julie Sheppard typed and retyped questionnaires, drafts, and the large correspondence flowing from the project. LeMealle Johns, Ann Molik and Debra Berne typed manuscript drafts. Several Eastern Michigan University students contributed to the project by taking notes on the workshop, coding materials and assisting in data processing. They are Patrick Bingham, John Clarry, Katherine Digneit, George Garris, Donna Jackson, Mark Jurecki, Rick Leiffers, Michael Radelet, Karen Simpkins, and Michael Stahl.

Constance Einstadter handled the final preparation of the workshop and we are indebted to her for her efficiency and efforts in making the workshop a success. Jeanne Pritchard and the office staff of the Department of Sociology at Eastern were invaluable in assuring the regular progress of the project, pitching in during the unavoidable crisis that occurred.

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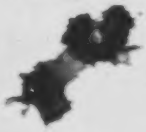

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Introduction

The problem of caring for children outside of the home of their biological families has been one of the chief concerns of child welfare agencies for sometime. There are four basic categories of such children:

a) those who are in short-term care awaiting return to their biological families.

b) those whose status in care is indeterminant while work is being continued with the biological family.

c) those who are in the permanent custody of the agency and who will not be returned to their biological families, and

d) those who have special needs (e.g., physical, emotional, or mental) that require specialized families.

The major consideration in planning for the children who will not be returned to their families or who are eligible for adoption has shifted considerably over the past few years. As fewer healthy infants are released to agencies for adoption, the emphasis of many agency programs has moved from finding "perfect" children for "perfect" families to programs designed to emphasize the adoption of "hard-to-place" children. Many agencies have had great success with programs designed to place children from minority groups or inter-racial backgrounds. The child that is still most likely to await appropriate placement is the one with a mental, emotional, or physical handicap, especially of the more severe type. Since family care is usually the optimum plan for these children, where adoptive homes are not available, the agency must find suitable foster homes.

The purpose of this study has been to survey current practices in the placement of handicapped children in an attempt to determine those practices and policies that are most likely to result in maximization of adoptive

placements for these children. The project staff collected data from foster care and adoption workers in a number of different agencies. They talked with and observed the operations of state and local staffs in six states. The following report summarizes and evaluates the major findings of the project. It concludes with recommendations for child welfare agency staff and suggests areas for research and demonstration projects.

Throughout this report, "handicap" refers to a mental, emotional, or physical condition that might prevent or delay suitable placement. The authors recognize that many people have come to deplore a label that has long been used to emphasize limitations rather than merely recognize differences. Although we share this concern, we could not find a suitable alternative which would adequately identify the types of children with whom we are concerned. The "exceptional child" is what every parent seeks. The term "special need" child includes children who are difficult to place for reasons other than a mental, emotional, or physical condition. Although "handicapped child" might seem a derogatory term to some, it is sufficiently familiar to identify the children with whom we are concerned without the awkwardness of constantly spelling out specific special needs.

One of the questions asked repeatedly during the study was what was meant by handicapped. The term was purposely left undefined, in recognition that what constitutes a handicap varies from community to community. We were interested in the potential placement of any child whose mental, emotional, or physical condition might prevent or delay the placement that the agency had determined would be most beneficial. We felt that workers and agency personnel themselves were best able to define such conditions, since they knew their own communities and the difficulties they would face in placing a particular child. We conjectured, for instance, that a medical

condition that might be seen as a handicap to placement in one community might not be significant in another.

As a result of allowing the workers to define a handicap as any characteristic that might delay or prevent placement, we found that there were indeed significant variations, not only between geographical areas but between agencies in the same community. Workers who were placing Down's Syndrome children in adoptive homes were not as prone to define "slow children" as handicapped.

Many workers indicated that older children and children of minority races were also operating under a handicap in their particular community--that these characteristics were likely to be an obstacle to suitable placement. Although these characteristics complicate the placement of a child with a mental, emotional, or physical condition, the study did not focus on age or race, or define these characteristics as handicaps. Most programs designed to place special need children do not make this distinction, and there are certainly many similarities between successful placement of an older child and a handicapped child. There is no way of recognizing the extent to which many older children with emotional problems might be more adequately labeled as handicapped in terms of age. However, any label that the worker thinks is important in determining a family's ability to accept a given child is likely to be translated into some message sent to that family about the child's desirability.

Throughout this report, the concentration is on children for whom the best placement situation is jeopardized because of a mental, emotional, or physical condition that makes it difficult to find families who are willing to provide the stable, loving environment that every child needs in order to develop to his full potential. In this sense the child suffers an additional handicap--that of not having a family.

VOLUME I

Chapter I

THE STUDY: BACKGROUND, GOALS, AND CONTEXT

This is a report on current agency policy and practices as they pertain to the placement of handicapped children. Its basis is a study that developed out of the changing trends in adoption, the growing concern for protection of children, and other studies suggesting problems in the placement of handicapped children. The present chapter briefly describes these areas and outlines the study goals. In addition it examines child welfare legislation and organization of services in the six states in which study agencies are located.

BACKGROUND

Latest federal statistics for 1971[1] indicate that the number of non-relative adoptions has decreased for the nation as a whole. This decrease continued between 1971 and 1972[2] in the fifty-seven agencies surveyed by the Child Welfare League of America. The decrease in adoption appears to reflect a decrease in the number of healthy infants available for adoption rather than a lack of interest on the part of potential adoptive families. Most agencies have a long list of families waiting for infants and are discouraging applications from families that are only interested in healthy infants.

The national movement to determine and protect children's rights includes the tenet that all children have the right to a stable home with loving parents. If the child's biological family cannot care for him, there is strong pressure for finding a substitute family.[3] In addition, concern

[1] Adoptions in 1971: Supplement to Child Welfare Statistics, U.S. Department of Health, Education and Welfare, Washington, D.C., 1973.

[2] Michael J. Smith, "Selected Adoption Data for 1969, 1970 and 1971, "Child Welfare League of America, Inc., New York, 1972.

[3] See Bill of Rights for Foster Children.

for the rights of the child means that his needs must be considered and not superceded by the rights and arbitrary needs of the adults who care for him.

Grass root citizens groups of adoptive and foster parents are pressuring agencies and state legislatures to re-examine their policies. These groups are attempting to redefine the role of the family vis a vis the agency by stressing the need for agencies to be more responsive to the needs of children and less arbitrary in their determination of the best care plan for the child.

These trends have resulted in the agencies redefining their major objectives so that for the adoption worker especially, the goal is to find a family for a child in need rather than a child for a nice family. Although there is a substantial body of literature dealing with adoption, relatively little work has been done on the unique problems that the mentally, emotionally, or physically handicapped child presents to the agency. One study[4] of families that had adopted such children suggested that the families were typically marginal in meeting agency requirements and often felt that they were forced to accept a child that had problems because they had failed to meet agency criteria. Many of these families, however, felt that the problems their children had brought to the family were manageable and that they might have had to face the same problem with biological children born into the family. Some seemed to view the agency's role as the "hand of fate" that determined that they would have a child with problems, but this was no different than any other life gamble.

Studies[5] of the willingness to adopt atypical children suggests that

[4]Fred Massarik and David S. Franklen, Adoption of Children with Medical Conditions, Children's Home Society of California, Los Angeles, 1967.

[5]See for instance Henry Maas and Richard Engler, Children in Need of Parents, Columbia University Press, New York, 1959 and Ursula Gallagher, "The Adoption of Mentally Retarded Children," Children, 15(Jan.-Feb., 1968) pp. 17-21.

there is more willingness among families to accept such children than is utilized by agencies. Chambers[6] found that though a wide range of handicaps is acceptable to adoptive applicants as a group, only one or two handicaps can be accepted by any given couple. The adoption worker faces the problem of helping families decide what kind of child they can best parent and what kind of child will provide greatest satisfaction to the family. Research[7] suggests that the child welfare worker's own feelings about the problems that a handicapped child brings to a family may be one of the crucial factors in their ability to work effectively with prospective families.

Effective agency policy and practice in placing handicapped children in adoptive or foster homes will in part depend on the extent to which agencies are able to find answers to the following questions:

1) What are the crucial considerations in providing good family care for such children?

2) Can suitable homes be found?

3) How do you find the appropriate families?

4) What services are most appropriate for the agency to provide at different stages in their work with the family?

5) What are the appropriate modifications that are necessary in agency structure, practice or policy to achieve effective service delivery in this area?

PROJECT GOALS

The project described in this report explored some of these questions. Data were gathered from a number of sources and utilized to describe existing agency service in an attempt to discover methods of effective service

[6]Donald E. Chambers, "Willingness to Adopt Atypical Children," Child Welfare, 49 (May, 1970).

[7]Alice Hornecker, "Adoption Opportunities for the Handicapped," Children, (July-August, 1962) pp. 149-152.

delivery in providing adoptive placements for handicapped children. The purpose of this project was to discover the most effective procedures and practices in maximizing the number and quality of such placements. As outside observers, the project staff hoped to be able to discover patterns or tendencies that might not be obvious to the staffs involved in the actual placement. In order to assure the generalizability of the project findings, the project studied a variety of agencies in a number of states. Funds allowed the inclusion of agencies from six states, each of which varies in its organization of child welfare services. Public and private agencies located in rural and urban areas in each state were included.

The project was not limited to collecting and analyzing data on what was currently being done. In addition, the staff attempted to assure that the project findings would be disseminated to the agencies in a form that could be immediately utilized to modify practices. With these goals the project was organized in three stages:

1. Collection and analysis of data from adoption agencies and state departments of social service on their policies and practices regarding the care of handicapped children, with special emphasis on the way in which the agencies seek out or encourage prospective adoptive and foster families to insure the placement of the child in a suitable home.

2. Organization of a workshop (Ann Arbor, March 23, 1973) where representatives from adoption agencies, agencies organized to help families with children with specific kinds of handicaps, associations of parents of children with handicaps, and adoptive parents of handicapped children were able to exchange information and ideas about adopting handicapped children. This discussion of problems, policies, and possible program guidelines was

utilized both as a dissemination technique to give the workers some feedback on the insights developed in analysis of the data that had been gathered to that point and to elicit further data for analysis.

3. Preparation of a handbook for distribution to agencies communicating the insights on successful practices for the placement of mentally, emotionally, or physically handicapped children that evolved from the research and workshop stages.

The specific research questions of the project were:

Agency Level:

1) What are existing agency policies for classifying children as "special need" because of a mental, emotional, or physical handicap?

2) What are agency practices in attracting potential adoptive and foster parents for such children?

3) What are agency criteria for studying such families?

4) What are agency alternatives to placing a handicapped child in a private home (i.e., institutional placement) and when are such alternative placements utilized?

5) What is the number and characteristics of handicapped children in agency cutody over the past year?

6) What is the rate of placement or prognosis for placing these children?

7) What are the policies and programs that agencies see as likely to be useful in enlarging the number of families interested in caring for handicapped children?

Worker Level:

9) What is the caseworker's interpretation of her own agency's policies?

10) What are the characteristics of handicapped children being placed in adoption, the means by which adoptive parents reached the decision to adopt such a child and the general characteristics of the adoptive families?

11) What are characteristics of the children in the worker's agency whom the worker feels are unlikely to be placed in adoptive homes, the reasons such placement is unlikely, and the type of care the agency is likely to be able to arrange?

Project staff gathered data from organizations and agencies in six states in an attempt to explore the answers to these questions. Chapter II describes the methodology and research techniques used for gathering data and its analysis. Chapters III through V examine the data in light of the project goals. Chapter VI describes the dissemination phases of the project. Chapter VII makes a series of recommendations for improved service delivery and Chapter VIII summarizes findings and evaluates the project's success in meeting its goals.

The purpose of the report is not to evaluate the adequacy of individual agencies, types of agencies, or states. Rather it is an attempt to systematize data about current practices in the field and to seek insights into the way in which agency organization, worker attitudes, and community milieu facilitate the adoptive placement of handicapped children.

CONTEXT: ADOPTION IN THE SIX STATES

The organization of adoption services varies between the states but there are also certain commonalities. In every state the adoption law specifies the individuals, organizations, and agencies that may be licensed to place children. Although professionals agree that independent placements (those in which no licensed agency studies the home and supervises the placement) are hazardous to the child and despite state legislation attempting to limit or control such placements, such placements do occur in each of the six states.

All adoptions are finalized in county courts where the judges are elected. Thus the state statutes are interpreted at the local level and within the context of the judges' perception of the communities values. The county court is responsible for termination of parental rights, and approves the adoptive study. Although the courts usually rely heavily upon agency

recommendations, when an agency is involved, sometimes these are overridden. Many agencies are aware of and work within the framework of the interpretation of their particular judge.

Chart 1.1 summarizes the legal statutes and organizational structure of the six states in this study. Every state except Alabama recognizes voluntary release of a child by its parents. In Alabama the court acts on every release. Four of the six states also recognize secondary releases: permitting the custody of a child to be transferred from one agency to another. Although voluntary and secondary release legislation increases the liklihood that a child can be speedily placed in the most suitable adoptive home, there is some concern that such procedures may fail to adequately protect parental rights. Subsequently some states are considering revising their codes to include court supervision of all releases. In Alabama and Indiana where there is no provision for secondary release, inter-agency placements are made.

Four states have provision for subsidized adoptions including both maintenance and medical subsidies. In Ohio the funding for these subsidies is at the county level. Indiana's legislation is recent and was not in effect during data collection phases of the study. Respondents in each state reported they felt there had been inadequate utilization of subsidy legislation to date.

Most non-relative adoptions in each state are made by either the state department of social services or private agencies. Most of the private agencies have concentrated their resources toward placing healthy infants but a few are also placing special need children. (See Chapter III for a detailed analysis.) The largest proportion of special need children are in the custody of the public agencies. Public agencies usually have an office

Chart 1.1

State Adoption Legislation and Organization

	Alabama	Georgia	Indiana	Michigan	Nort Caro
Subsidized Adoption	No	Yes	Yes	Yes	No
Probationary period between placement and finalization	6 months	5 to 15 months	6 to 12 months	12 months	12 m
Voluntary release	No	Yes	Yes	Yes	Yes
Secondary release	No	Yes	No	Yes	Yes
Special staff for special need children	No	No	No	Yes	No
State adoption exchange	No	Yes	Yes (New)	Yes	Yes
State Office approve or review adoptions	Yes	Yes	No	No	Yes (But afte final
State Office matches families and children	Yes	Yes	No	No	No
County Independent of State Office	No	No	Yes	No	No
Length of abandonment for termination of parental rights	Varies	Varies	6 to 12 months	24 months	6 mo
State coordinated training	Yes	Yes	No	Yes	Yes
State reimbursement for tuition	Yes	Yes	Yes	Yes	No

Chart 1.1

State Adoption Legislation and Organization

	Alabama	Georgia	Indiana	Michigan	North Carolina	Ohio
	No	Yes	Yes	Yes	No	Yes (no state funding)
tween placement and	6 months	5 to 15 months	6 to 12 months	12 months	12 months	A minimum of 6 months
	No	Yes	Yes	Yes	Yes	Yes
	No	Yes	No	Yes	Yes	Yes
ial need children	No	No	No	Yes	No	No
e	No	Yes	Yes (New)	Yes	Yes	Yes
r review adoptions	Yes	Yes	No	No	Yes (But often after finalization)	No
milies and children	Yes	Yes	No	No	No	No
State Office	No	No	Yes	No	No	Yes
for termination of	Varies	Varies	6 to 12 months	24 months	6 months	2 years
ing	Yes	Yes	No	Yes	Yes	No
r tuition	Yes	Yes	Yes	Yes	No	Yes

in each county. The coordination and control of county policy varies tremendously between the states. In Georgia and Alabama most inter-county or inter-area placements are not made at the county level, but are made at the state or regional level by a staff that matches children with families. This is not typical of other states in the sample although they all have adoption exchanges to facilitate inter-county placements. In Ohio and Indiana, the county agencies are independent of the state office, limiting the role of the latter to an advisory unit. Michigan and North Carolina fall between these two patterns. The state offices set policy and coordinate adoption services, but the county maintains some autonomy in implementing procedures.

Finally, all of the states except Indiana and Ohio have a staff development office to coordinate in-service training materials for child welfare workers although the investment in this area varies. All of the states except Indiana have provision to partially reimburse workers for expenditures for additional training.

It is within this framework of common patterns and variations that the project attempted to discover and evaluate the ways in which the agencies are to place handicapped children.

Chapter II

METHODOLOGY

LEVELS OF ORGANIZATION

This study focuses on several levels of organization. The federal level shapes goals, policies, and procedures through various departments that collect and coordinate information, provide consultation to the various states, collect statistics on adoptions, fund research and demonstration projects, and provide funds for special personnel at the state level. These activities are carried out through several offices or bureaus within the Department of Health, Education, and Welfare such as the Children's Bureau of the Office of Child Development. The United States is divided into several regional areas by H.E.W. with staff in these offices providing services to state agencies. This study focuses on adoptions in two of these regions. Three states were selected within each region (Indiana, Michigan and Ohio from Region 5 and Alabama, Georgia and North Carolina from Region 4).

As indicated in Chapter I, the actual adoptions are confirmed at the county level in accordance with the appropriate state legal codes. The state departments of social services vary in the extent to which they influence the actual operation of local agencies.

There are three types of adoption agencies differing in their source of funds, type of organization, and population served. They are public agencies, private sectarian agencies, and private non-sectarian agencies. Our analysis strategy anticipated differences in the goals, policies, and procedures of these three types of agencies with regard to finding adoptive homes for

handicapped children. A sample of each type of agency was selected from each region. Since county public agencies differ greatly by size and type of community serviced, they were further stratified on the basis of metropolitan or non-metropolitan location.

While some data were collected at the federal, regional, and state levels, the primary focus of the study was on the individual agency. We attempted to analyze goals, policies, and procedures for placing handicapped children in adoptive homes and to examine how these goals, policies and procedures were shaped and implemented by the agency's foster care and adoption workers.

Unlike most [illegible] studies, the researchers were not concerned that the research activity itself might contaminate the data being collected. To the contrary--one of the goals was to evaluate the extent to which the research could be used as a catalyst for social change. This goal freed the project from constraints of feeding information back into the system until after all of the data were collected. It was possible to reach tentative conclusions and then validate these at later data acquisition stages.

Attempts were made to validate information by comparing data from several levels of organization: state coordinator, agency director, and adoption workers. This continuous analysis and feed back led to several important insights on facets of the adoption process of handicapped children that would not have developed if the data analysis was postponed until acquisition was completed.

Furthermore, use of a multi-faceted approach to collecting information allowed the project staff to develop a holistic picture of the adoption

process in the various types of agencies studied. It not only led to insights not likely to be acquired through a single method, but also allowed us to develop and refine these insights by checking their accuracy and generalizability. This technique worked well in many ways (e.g., determining the role of the private physician in the adoptive process and the meaning of a disrupted adoption to the worker). However, some insights still came too late to be investigated in the study (e.g., non-relative adoptions supervised by court staff without services from the agencies that we studied).

SAMPLE

Adoption agencies were selected from six states (See Levels of Analysis as outlined in Chart 2.1). The agencies comprising the northern sample were selected from Indiana, Michigan, and Ohio. All of the agencies in these states licensed to do adoptive placements were sorted into one of the following categories: public metropolitan, public non-metropolitan, private sectarian, and private non-sectarian. Agencies were then selected on a random basis from each category.

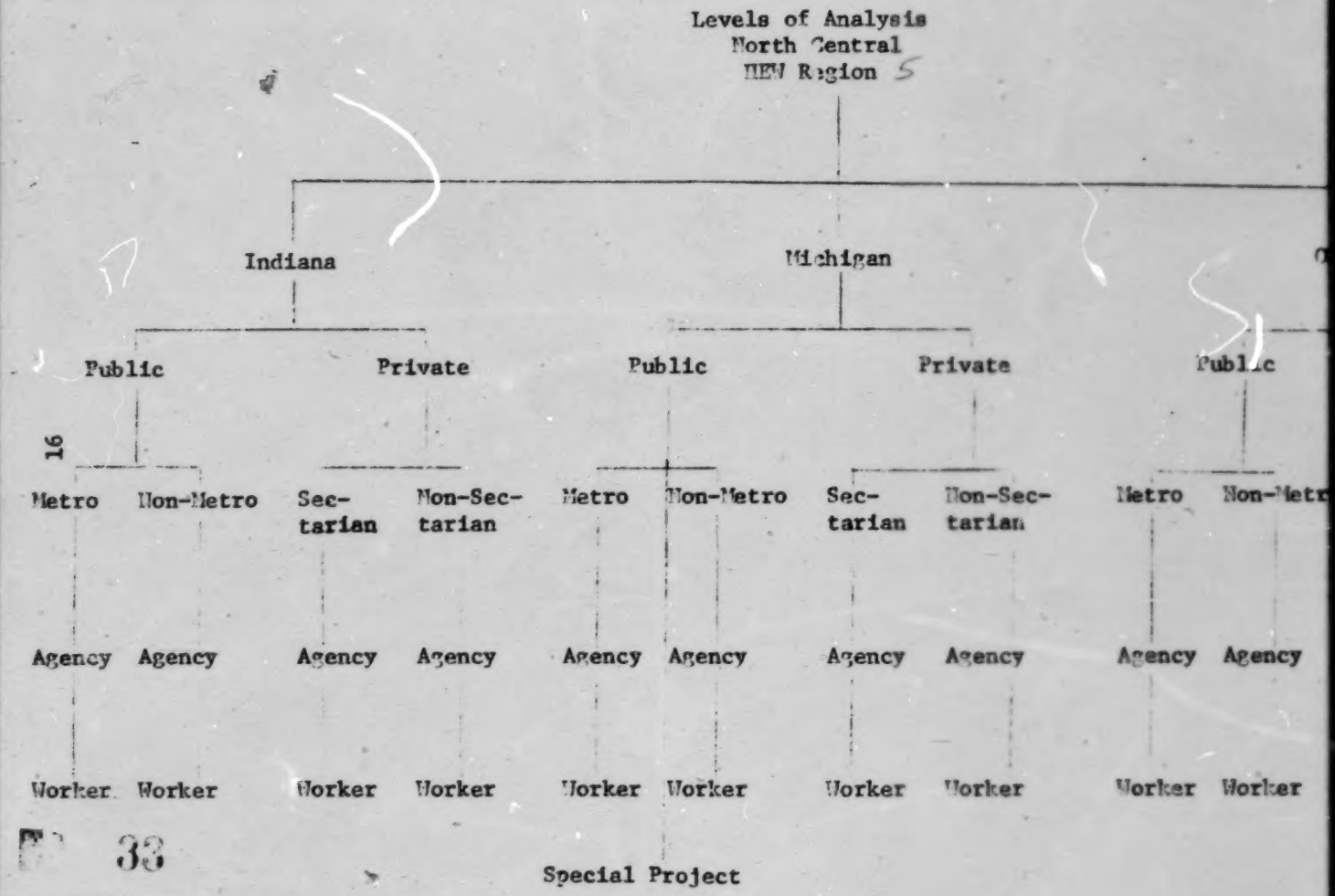
Table 2.1

Northern Sample

Strata	N	Refusal	Added	Completed
Public, metropolitan	15	2	6	19
Public, non-metropolitan	15	1	1	15
Private, sectarian	10	1	1	10
Private, non-sectarian	9	1	--	8
Total	49	5	8	52

Five agencies refused to cooperate on the grounds that participation would overburden their staffs. In four cases refusals came early enough so

Chart 2.1


Levels of Analysis
North Central
HEW Region 5
Indiana
Michigan
Public
Private
Public
Private
Public
Metro
Non-Metro
Sec-tarian
Non-Sec-tarian
Metro
Non-Metro
Sec-tarian
Non-Sec-tarian
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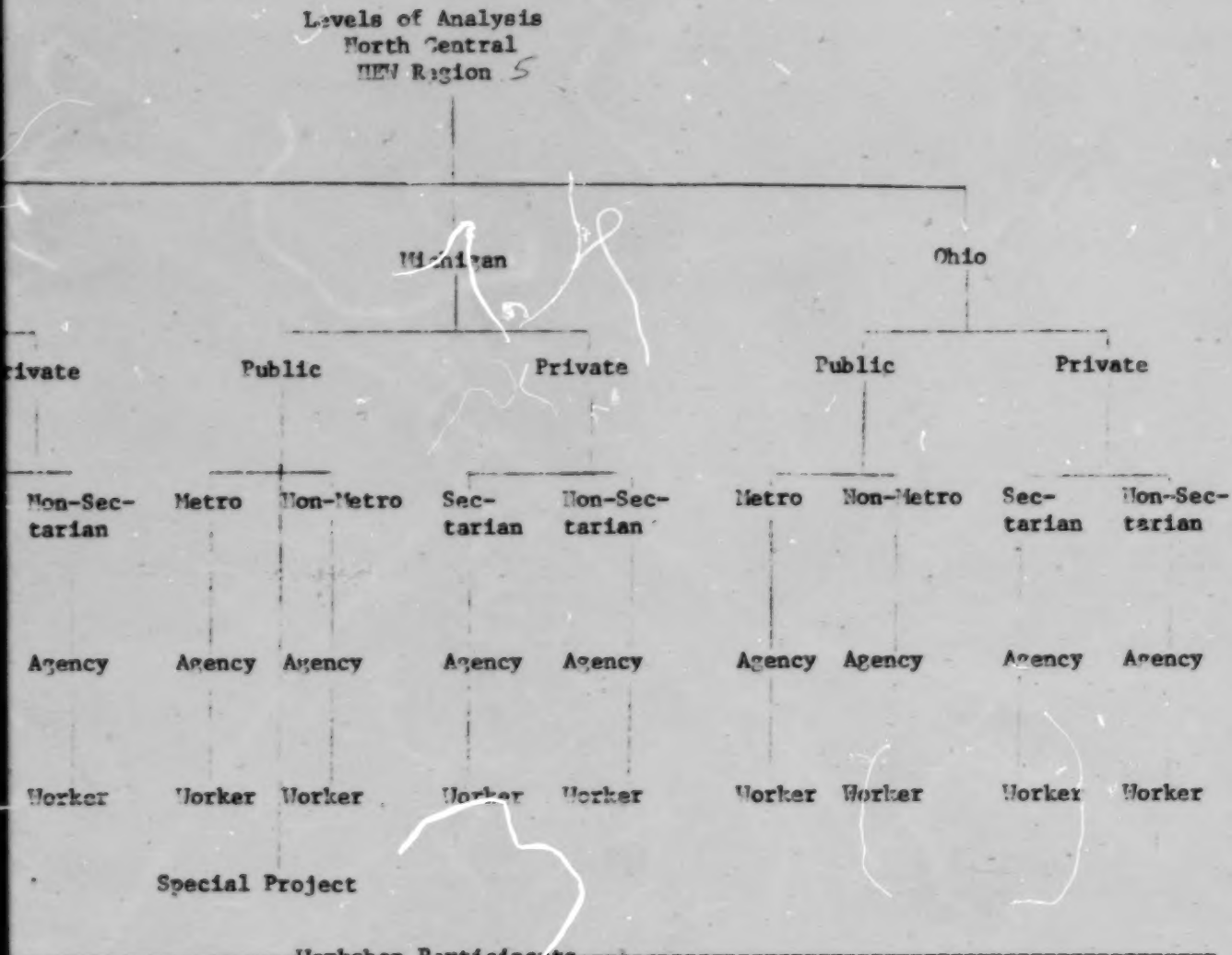
Worker
Worker
Special Project
Workshop Participants

Chart 2.1


Levels of Analysis
North Central
HEW Region 5
Michigan
Ohio
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Public
Private
Public
Private
Non-Sec-tarian
Metro
Non-Metro
Sec-tarian
Non-Sec-tarian
Metro
Non-Metro
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Agency
Agency
Agency
Agency
Agency
Agency
Agency
Agency
Agency
Worker
Worker
Worker
Worker
Worker
Worker
Worker
Worker
Worker
Special Project
Workshop Participants

Chart 2.1 Continued

Levels of Analysis Continued
South
HEW Region 4

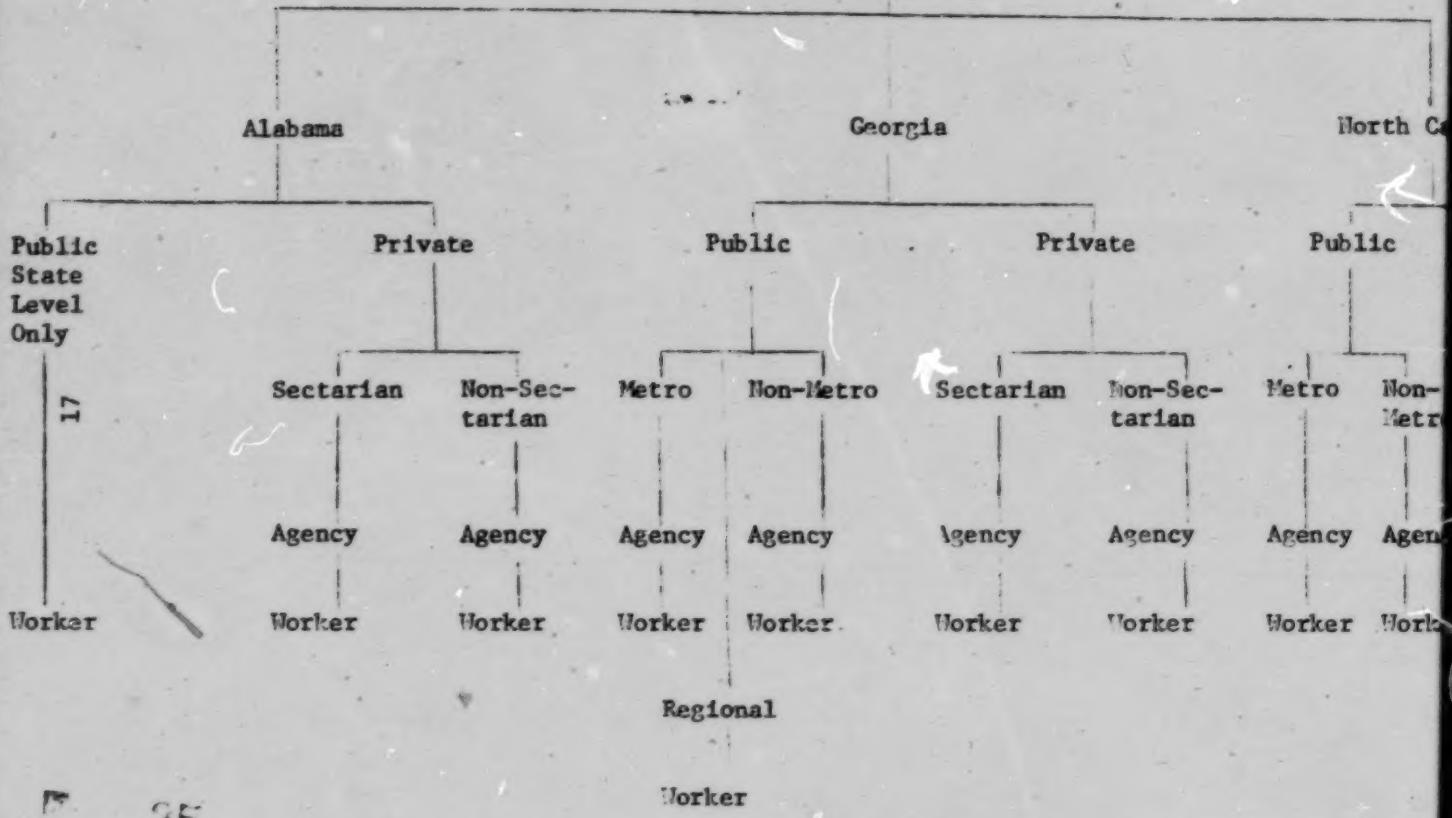
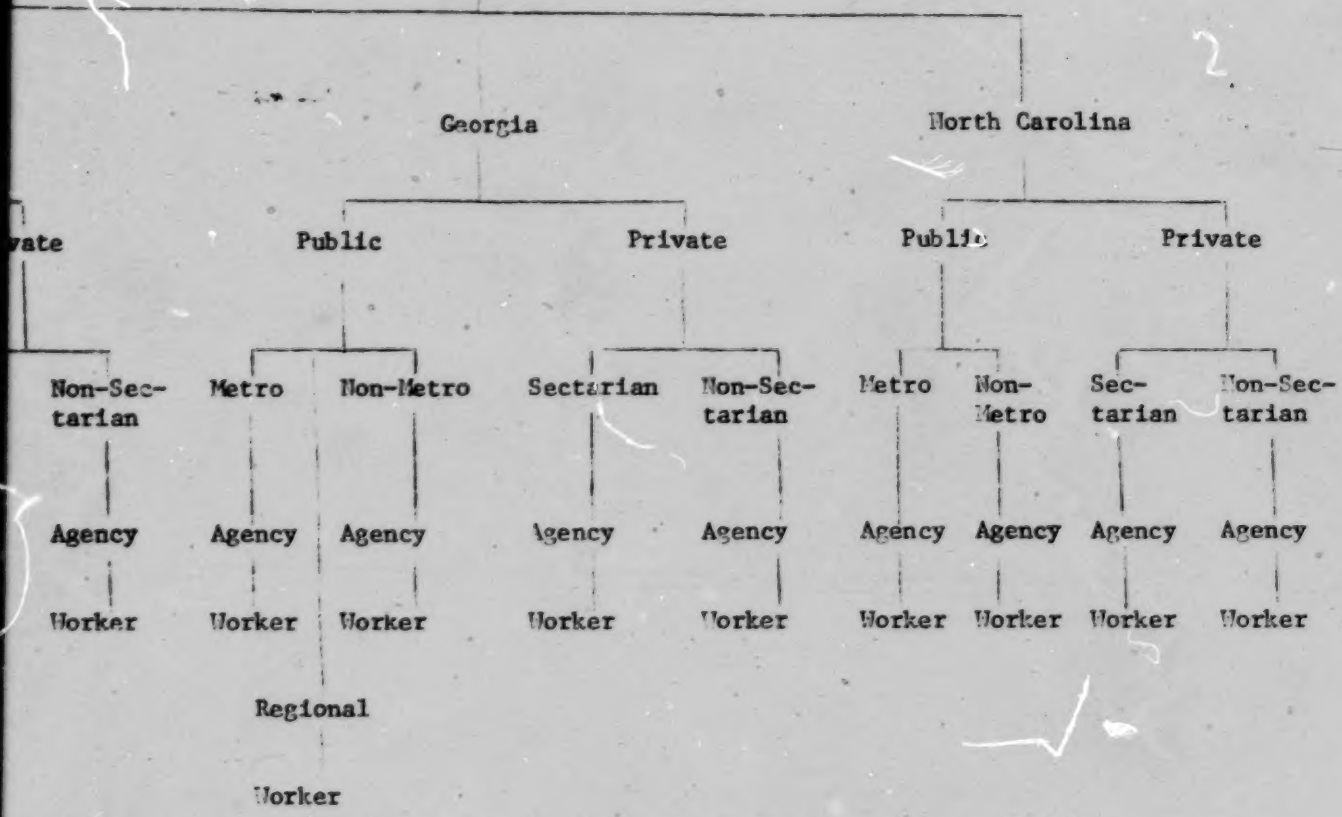


Chart 2.1 Continued

Levels of Analysis Continued
South
HEW Region 4



that the agency could be replaced by another of the same type. After data collection had started, it was decided to include all of the metropolitan public agencies in Michigan that were involved in a special state project to find adoptive homes for special need children. This added four agencies to the sample. Thus total sample size for the northern states was 62. Completed agency questionnaires were returned by 52 or 84 per cent of the agencies.

Agencies in three southern states were included in the study. As these agencies were further away and were not offered stipends to the workshop, they did not participate to the same extent as the northern agencies. Sample selection in these states was complicated by variations in the organization of adoption services. An attempt was made to select agencies on the same basis as in the north but this was only possible for the public agencies in North Carolina. In Alabama, inter-county adoptions are all handled through the State Office in Montgomery. This office agreed to cooperate in the study, and was visited by the project staff. In Georgia, state officials felt that many of the public agencies could not be asked to participate in the study as they did not have the available staff time. A purposive sample of five agencies and a regional office distributed across the state was selected with cooperation of state officials. In addition, an agency questionnaire was completed by the state office and these data are included where appropriate. The state questionnaire is not included in sampling calculations.

Because of the limited number of private adoption agencies in these three states, all private agencies were included in the sample.

Table 2.2

Southern Sample

Strata	N	Refusals	Completed
Public, metropolitan	12	1	11
Public, non-metropolitan	8	3	5
Private, sectarian	9	3	6
Private, non-sectarian	6	1	5
Total	35	8	27

Seventy-nine per cent of the southern agencies in the sample returned completed questionnaires. Of the 96 agencies selected for the total sample, 79 or 82 per cent returned completed questionnaires.

Each agency questionnaire asked the agency director to list the names of each adoption and foster care worker whose case load included children who were legally eligible for adoption. Two agencies (one in the north and one in the south) refused to allow their workers to complete the worker questionnaire. Three agency questionnaires were received too late in the data collection stage for questionnaires to be sent to the workers in their agency. Completed questionnaires were returned by 205 or 67 per cent of the workers who were mailed questionnaires.

Questionnaires return rates were relatively high for both agency and worker Several factors might account for a return rate much higher than is typical of mailed questionnaires. The cooperation of state office officials in writing to each agency and asking for their cooperation undoubtedly helped in convincing agency staff of the legitimacy of the project and potential utility of its findings. For those agencies in the northern sample, the invitation with

stipend to participate in the workshop helped convince them their cooperation would provide immediate feedback. Follow up telephone conversations with the workers also helped to involve them in the study and emphasized the importance of their cooperation and participation.

Chart 2.2 outlines the temporal organization of the study and indicates the many types of information gathering techniques used. Most of the data utilized for the quantitative analysis in this study were gathered through mailed questionnaires completed by the agency director or case work supervisor in the sample agencies. A second set of questionnaires was completed by the foster care and adoption workers in the agencies whose case load included children legally eligible for adoption. (Copies of the two questionnaires are included in the Appendix.)

Additional data was collected in a variety of ways.

State Directors: Extensive unstructured interviews were conducted with the state adoption specialist in each of the six states. The topics covered included the adoption trends in each state, adoption laws, special programs, state organization of adoption and foster care, and innovative programs in the state designed to find homes for handicapped or special need children.

Agencies: The project directors visited nine different agencies and conducted intensive interviews with the adoption and foster care supervisors. In six of these agencies, conferences were set up with a majority of the adoption and foster care workers participating in a discussion of the problems of finding homes for handicapped children within their communities and the types of strategies that had been attempted in that agency.

Chart 2.2

PROJECT LOG

Month	Data Collection, Etc.	Site Visits and Unstructured Interviews	V
July '72	Literature review, instrument design, sample selection		
August	Literature review, instrument design, sample selection	Indiana Department of Social Services, Washtenaw Catholic Social Services	
September	Pre-test Agency	Child and Family Services Washtenaw County	A
October	Pre-Test Worker Questionnaires Analysis of Agency Pre-test Questionnaire, Prepare and mail Northern Agency Questionnaires	Michigan Special Project Staff Meetings	A
November	Mail South Agency Questionnaires Semantic Difference Pre-test Analysis of Pre-test of Workers	Michigan Special Project Staff Meetings, Catholic Social Services--Wayne, Staff Meeting Child and Family Services of Washtenaw County	A
December	Prepare and Mail Worker Questionnaires, Pre-test Clean-up	Staff Meeting, Department of Social Services Washtenaw County Meeting of State Adoption Specialists at Metro Airport. Staff Meeting-Spaulding	A

Chart 2.2

PROJECT LOG

llection, Etc.	Site Visits and Unstructured Interviews	Workshop
ture review, instrument sample selection		
ture review, instrument sample selection	Indiana Department of Social Services, Washtenaw Catholic Social Services	
t Agency	Child and Family Services Washtenaw County	Advisory Board Meeting
t Worker Questionnaires ls of Agency Pre-test nnaire, Prepare and mail n Agency Questionnaires	Michigan Special Project Staff Meetings	Advisory Board Meeting
uth Agency Questionnaires c Difference Pre-test ls of Pre-test of Workers	Michigan Special Project Staff Meetings, Catholic Social Services--Wayne, Staff Meeting Child and Family Services of Washtenaw County	Advisory Board Meeting
and Mail Worker nnaires, Pre-test p	Staff Meeting, Department of Social Services Washtenaw County Meeting of State Adoption Specialists at Metro Airport. Staff Meeting-Spaulding	Advisory Board Meeting

Chart 2.2 Continued

Month	Data Collection, Etc.	Visits
January '73	Continue Worker Questionnaire mailings, Pre-test Report	Washington, D.C. Visits with Bureau of Statistics and SRS Experts, Michigan Special Project Staff Meetings
February	Select Southern Sample, Mail Southern Agency Questionnaires	State and Private Agencies in Atlanta and SRS Regional Office, Staff and Director Montgomery, Alabama
March	Mail South Worker Questionnaires	Wayne Department of Social Services Staff, Child Welfare League of America, Regional Meetings, Toronto
April	Edit, Code Preparation, Coding	Spaulding and Michigan Special Project Staff Meetings
May	Data Coding, Punching, Summary	Bud Turner, Lansing Staff Meeting, Lucas County Department of Social Services
June	Data Coding, Punching, Summary	Michigan Child Placement Conference, Detroit
July	Data Coding, Punching, Summary	Meeting with Supervisors, Wayne Department of Social Services

Chart 2.2 Continued

a Collection, Etc.	Visits	Workshop
tinue Worker Questionnaire lings, Pre-test Report	Washington, D.C. Visits with Bureau of Statistics and SRS Experts, Michigan Special Project Staff Meetings	Advisory Board Program, Reservations
ect Southern Sample, l Southern Agency Questionnaires	State and Private Agencies in Atlanta and SRS Regional Office, Staff and Director Montgomery, Alabama	Advisory Board Meetings
l South Worker Questionnaires	Wayne Department of Social Services-Staff, Child Welfare League of America, Regional Meetings, Toronto	Advisory Board Meetings, Leader Training Workshop
t, Code Preparation, Coding	Spaulding and Michigan Special Project Staff Meetings	Mail and analyze Evaluations
a Coding, Punching, Summary	Bud Turner, Lansing Staff Meeting, Lucas County Department of Social Services	
a Coding, Punching, Summary	Michigan Child Placement Conference, Detroit	
a Coding, Punching, Summary	Meeting with Supervisors, Wayne Department of Social Services	

Chart 2.2 Continued

Month	Data Collection, Etc.	Visits
August '73	Data Cleaning and Analysis	
September '73	Data Cleaning and Analysis	Michigan Special Project Meetings
October '73 - June '74	Data Cleaning and Analysis	

23

Chart 2.2 Continued

lection, Etc.	Visits	Reports
aning and Analysis		Paper at American Sociological Association Meeting in New York, Handbook Preparation
aning and Analysis	Michigan Special Project Meetings	Handbook Draft
aning and Analysis		Final Report Preparation, Edit Handbook, Print and Distribute Handbook

Special Project: The State of Michigan Department of Social Services established a speical project to find homes for special need children in April of 1972. Study staff attended several of their state-wide monthly meetings and were able to observe some of the problems of innovation that arose in the development of policy and the way in which these problems were handled. All of these state workers participated in filling out worker questionnaires and in addition provided information about all of the handicapped children that they had placed in adoption between April 1972 and June 1973.

Workshop: A workshop was held in Ann Arbor, Michigan on March 23, 1973. Participants included representatives of the northern sample agencies, State of Michigan Special Project workers, state and federal adoption specialists, workers from agencies, hospitals, and schools that serve handicapped children, representatives from associations serving the families of handicapped children, adoptive parents of handicapped children, representatives of citizen organizations interested in adoption, and handicapped university students. The organization of the workshop included nine discussion groups that met for two hours in the morning and again for two hours in the afternoon. The discussions were led by professionals who work with handicapped individuals and adoption workers who had experience in placing special need children in adoptive homes. All of the sessions included a student recorder who took extensive notes on the discussion. Transcripts of these notes were analyzed.

PROBLEMS

The collection and organization of the data necessary for meeting the objectives of this study presented several problems. Important variables for the study are the number of children with handicaps placed in adoptive homes,

the number of children eligible for adoption, and the number of handicapped adoptive placements. Unfortunately, many agencies were unable to provide this information. Most agencies do not have a record keeping system that allows them to obtain the necessary data without a file by file count. Although the majority of agencies were willing to cooperate in obtaining this information, some were not.

The unavailability of adoption statistics is prevalent at every level of organization. Although the federal government and most states attempt to compile such statistics, the level of precision and thoroughness of these attempts varies considerably. Even when the statistics available appear reliable, they seldom include tabulation by more than one or two characteristics.

Another problem arose in attempting to define handicap. The researchers suspected that workers might differentially define this term on the basis of their own particular orientation and experience. Rather than arrive at a precise definition to standardize this concept for all of the respondents, the decision was reached that a child was handicapped to the degree that he had a mental, emotional, or physical condition that limited his opportunity for an adoptive placement. Although age and race are also handicapping for some children, the workers were asked to respond to the questionnaires only in terms of mental, emotional, and physical handicaps and to include all medical conditions that in their opinion would increase the difficulty of finding a suitable home for a child.

Analysis of the data suggests that a number of children labeled as emotionally handicapped may be handicapped in terms of age and the length of time in agency custody. It seems quite certain that the older child or black child is perceived as more difficult to place in an appropriate home than the

younger white child with the same handicap.

A final problem, not unique to this study, involved the way in which appropriate interpretations of data can be developed in a situation in which there are many kinds of general policies that must be reinterpreted at the local level. Most adoption agencies are involved in state organizations that provide policy guidelines. All agencies are bound by the state legal code. However the policies and legal statutes must be translated into appropriate behavior on the part of the worker with differential monitoring from the agency and under the surveillance of the local judge and his particular interpretation of the appropriate statutes. In such a situation similar statements may have very different meanings. The project directors were impressed early in the project with the consistency with which workers discussed policy and their familiarity with innovations in the field. More detailed conversations, however, disclosed that this consistency masked many different feelings, orientations, and behaviors. Analysis of these data was conducted on two levels. Systematic checking for consistencies and interpretations provided some check on the validity and reliability of analysis. Qualitative analysis of the questionnaires formed the basis for telephone follow-up with some of the workers. Continual cross-checking the various data sources provided some evaluation of the consistency within an agency and highlighted areas that should be investigated more thoroughly in order to develop a contextual frame for interpretation of meaning.

Chapter III

THE AGENCIES

Adoptive homes are being found for children with handicaps. The seventy-nine agencies in the six states in our sample reported placing 228 handicapped children in adoptive homes during 1971 and 1972. However, 38 per cent of the agencies indicated they made no such adoptions in 1972 and 31 per cent reported none in either year (Table 3.1). This chapter is concerned with the agency characteristics that may influence the effectiveness of agencies in placing handicapped children. All agencies, (i.e., public, private sectarian, or private non-sectarian), are regulated by state law which influences their policies and procedures. Agencies differ in size, source of funds, kinds of services they provide, and types of communities they serve. Each of these factors may influence the effectiveness of an agency with regard to adoptive placement of handicapped children. Sample categories, to some extent, provide controls on these variables. Table 3.2 shows the distribution of our sample agenices by type of agency and state. Public metropolitan agencies tend to have the largest professional staffs (Table 3.3). Private non-sectarian agencies have less than half the staff of the public metropolitan agencies. Public non-metropolitan and private sectarian agencies average about ten professional workers each. Public agencies, of course, depend completely on tax dollars, while there is greater diversity in the sources of funds for the private agencies. Public agencies tend to provide a full range of social services, whereas private agencies often specialize in family services or children services. Most of the private agencies are located in metropolitan areas. The impact of agency type for placement of handicapped children will be examined.

Table 3.1

Handicapped Children Placed in Adoptive Homes in 1971 by Handicapped Children Placed in 1972 for Agencies

Handicapped Children Placed in 1972	Handicapped Children Placed in 1971						
	0	1-3	4-6	7-9	10+	Not Ascertained	Total
0	25	6	--	--	--	--	31
1-3	4	14	2	--	--	6	26
4-6	--	6	--	--	--	1	7
7-9	--	--	--	--	--	1	1
10+	1	--	1	1	1	1	5
Not Ascertained	--	--	1	--	--	9	10
Total	30	26	4	1	1	18	80

Table 3.2

Type of Agency by State

Type of Agency	State						Total
	Indiana	Michigan	Ohio	Alabama	Georgia	North Carolina	
Public, Metropolitan	6	19	3	1	5	6	31
Public, Non-Metropolitan	3	3	4	--	1	4	20
Private, Sectarian	1	4	5	3	2	1	16
Private, Non-Sectarian	2	5	1	1	2	2	13
Total	12	27	13	5	10	13	80

Table 3.3

Average Number of Professional Staff by Type of Agency and State

Type of Agency	State						
	Indiana	Michigan	Ohio	Alabama	Georgia	North Carolina	Total
Public, Metropolitan	31.8 N=4	36.9 N=7	68.0 N=3	12.0 N=1	39.8 N=4	51.2 N=5	42.3 N=24
Public, Non-Metropolitan	4.3 N=3	14.1 N=7	4.5 N=4	-- --	23.0 N=1	17.0 N=2	11.0 N=17
Private, Sectarian	1.0 N=1	8.5 N=4	16.8 N=5	6.0 N=3	3.5 N=2	-- --	9.6 N=15
Private, Non-Sectarian	11.5 N=2	18.2 N=5	3.0 N=1	9.0 N=1	32.0 N=2	24.5 N=2	18.4 N=13
Total	16.4 N=10	21.0 N=23	23.8 N=13	7.8 N=5	28.1 N=9	37.7 N=9	23.0 N=69

Both of the questionnaires used in the study are shown in the Appendix. The agency questionnaire includes questions about the number of children legally eligible for adoption the agency had in custody, the number in foster care, the number in other care situations, and the number placed in adoption for each of the last two years. They also ask the agency director to indicate the number of handicapped children legally eligible for adoption in each of these categories. Approximately one-fourth of the sample agencies did not have all of these statistics available. Several more agencies indicated they were making rough estimates. These estimates were used whenever they were plausible. However, one agency director reported placing seventy-one handicapped children in adoptive homes during 1972 while the foster care and adoption workers in this agency reported they had only placed six such children. The director's estimate was reduced to six handicapped adoption placements for 1972. If there is to be any evaluation of agency programs, then there is a critical need for agencies to collect appropriate statistics.

RECENT TRENDS IN NUMBERS OF CHILDREN IN CUSTODY AND PLACEMENTS

Published data indicate the number of non-relative adoptions has been decreasing in recent years in the United States. Table 3.4 shows this trend holds for most of the agencies in the study and for each type of agency except public metropolitan. (The variation in number of cases for the cells in a given column in the table is the result of non-ascertained data and demonstrates the need for more agencies to keep appropriate statistics.) The number of children in custody changed little between 1971 and 1972 for the public agencies and decreased about 10 per cent for the private agencies. This pattern is also true for changes in the number of children in foster care with a larger decrease for private sectarian agencies. The average number of

Table 3.4

Mean Number of all Children and Handicapped Children in Agency Custody, Placed for Adoption, In Foster Care and in Other Care Situations during 1971-1972 by Type of Agency*

Mean # of Children:	Public, Metropolitan All Children	Public, Metropolitan Handicapped Children	Public, Non-Metropolitan All Children	Public, Non-Metropolitan Handicapped Children	Private, Sectarian All Children	Private, Sectarian Handicapped Children	Private, Non-Sectarian All Children	Private, Non-Sectarian Handi Child
In Custody in '71	79.0 N=17	16.5 N=16	15.7 N=20	1.7 N=19	34.1 N=15	4.4 N=16	79.5 N=12	2.7 N=12
In Custody in '72	78.1 N=21	18.7 N=20	15.7 N=20	2.2 N=19	30.2 N=15	4.1 N=15	70.7 N=12	3.5 N=12
Placed for Adoption in '71	39.3 N=21	1.1 N=19	7.2 N=20	.6 N=19	47.9 N=16	1.5 N=16	64.5 N=12	1.3 N=12
Placed for Adoption in '72	36.2 N=24	3.5 N=24	7.8 N=20	.7 N=19	36.1 N=15	2.3 N=15	57.8 N=12	2.1 N=12
In Foster Care in '71	108.2 N=19	24.4 N=17	19.1 N=20	3.3 N=19	32.3 N=16	1.7 N=16	47.8 N=12	1.9 N=12
In Foster Care in '72	111.8 N=23	25.5 N=23	19.3 N=20	2.8 N=19	19.0 N=15	2.6 N=16	39.0 N=12	2.1 N=12
In Other Care Situations in '71	12.5 N=18	4.9 N=16	4.2 N=20	.6 N=19	29.2 N=15	2.1 N=14	.6 N=12	.7 N=12
In Other Care Situations in '72	25.7 N=18	56.9 N=19	4.3 N=20	.7 N=19	12.4 N=14	1.8 N=14	.6 N=12	.4 N=12

* The Number of agencies varies because agencies were not able to provide statistics for each of the questions for both years.

Table 3.4

Number of all Children and Handicapped Children in Agency Custody, Placed for Adoption, In Foster Care and in Other Care Situations during 1971-1972 by Type of Agency*

n ndicapped ildren	Public, Non-Metropolitan All Children	Public, Non-Metropolitan Handicapped Children	Private, Sectarian All Children	Private, Sectarian Handicapped Children	Private, Non-Sectarian All Children	Private, Non-Sectarian Handicapped Children	Total All Children	Total Handicapped Children
.5	15.7	1.7	34.1	4.4	79.5	2.7	48.8	6.3
16	N=20	N=19	N=15	N=16	N=12	N=12	N=64	N=63
.7	15.7	2.2	30.2	4.1	70.7	3.5	47.9	7.9
20	N=20	N=19	N=15	N=15	N=12	N=12	N=68	N=66
1	7.2	.6	47.9	1.5	64.5	1.3	36.4	1.1
19	N=20	N=19	N=16	N=16	N=12	N=12	N=69	N=66
5	7.8	.7	36.1	2.3	57.8	2.1	31.8	2.2
24	N=20	N=19	N=15	N=15	N=12	N=12	N=7	N=70
.4	19.1	3.3	32.3	1.7	47.8	1.9	52.7	8.3
17	N=20	N=19	N=16	N=16	N=12	N=12	N=67	N=64
.5	19.3	2.8	19.0	2.6	39.0	2.1	53.0	10.1
23	N=20	N=19	N=15	N=16	N=12	N=12	N=70	N=70
9	4.2	.6	29.2	2.1	.6	.7	11.6	2.1
16	N=20	N=19	N=15	N=14	N=12	N=12	N=65	N=61
.9	4.3	.7	12.4	1.8	.6	.4	11.6	17.6
19	N=20	N=19	N=14	N=14	N=12	N=12	N=65	N=64

ncies varies because agencies were not able to provide statistics
uestions for both years.

adoptions decreased for each type of agency with the exception of public agencies serving non-metropolitan areas, which stayed the same. Private sectarian agencies placed over 20 per cent fewer children in 1972 than in 1971.

A very different picture emerges looking at children with a physical, mental, or emotional handicap. There were more handicapped children in custody in 1972 compared to 1971; more such children in foster care and other types of care situations; and more handicapped children placed in adoption. Each type of agency increased the number of adoptive placements of handicapped children.

Attempting to assess the success of efforts to place handicapped children in adoptive homes is complex. Several different patterns of division of labor could accomplish the goal of finding families for these children. One pattern is based on specialization of skills and services, with a given agency in a geographic area placing only handicapped children while other agencies in the area place healthy infants. Another pattern has each agency in a geographic area sharing equally in the placement of handicapped children by finding families in proportion to size. Still another pattern is for the agency to utilize little effort in placing handicapped children, but use adoption exchanges and specialized agencies in another geographic area to find families for their handicapped children. Finally, variation of these patterns could include an agency that specializes in the placement of mentally retarded children, shares equally in placing physically handicapped children, refers emotionally disturbed children to another agency, and places healthy infants.

Table 3.5 reveals that public metropolitan agencies have the largest proportion of handicapped children in custody. They also placed the largest number of children on the average in 1972. This was a substantial increase

Table 3.5

Per Cent of Children in Custody who are Handicapped, Per Cent of Handicapped Children in Custo
and Per Cent of all Adoptions that are of Handicapped Children by Type of Agency for

	Type of Agency and Year						
	Public Metropolitan		Public Non-Metropolitan		Private Sectarian		Priva Non-S
	1971	1972	1971	1972	1971	1972	1971
% of all children in custody who are handicapped	21%	24%	11%	14%	13%	14%	3%
% of handicapped children in custody that are adopted	7	19	35	32	34	56	48
% of all adoptions that are of handicapped children	3	10	8	9	3	6	2

57

Table 3.5

n Custody who are Handicapped, Per Cent of Handicapped Children in Custody who were Adopted, of all Adoptions that are of Handicapped Children by Type of Agency for 1971 and 1972

	Type of Agency and Year									
	Public Metropolitan		Public Non-Metropolitan		Private Sectarian		Private Non-Sectarian		All Agencies	
	1971	1972	1971	1972	1971	1972	1971	1972	1971	1972
custody who	21%	24%	11%	14%	13%	14%	3%	5%	12%	16%
dren in ted	7	19	35	32	34	56	48	60	17	28
at are of	3	10	8	9	3	6	2	4	3	6

over 1971. However, they placed the smallest proportion of the handicapped children they had in custody, representing only a very small percentage of all children they placed for adoption in 1971 and 10 per cent of the children placed for adoption, in 1972. In contrast, public non-metropolitan agencies tend to have few children in custody and place few children for adoption whether they are handicapped or not. Table 3.5 indicates that during a given year they find adoptive homes for about one of the three handicapped children they have in custody. Like the public metropolitan agencies, not more than 10 per cent of their adoptive placements in a year are of handicapped children.

The private sectarian agencies also placed about one-third of the handicapped children they have in custody in adoptive homes in 1971 and over one-half in 1972. They have twice as many handicapped children in custody as the public non-metropolitan agencies and about one-fourth as many as the public metropolitan agencies. Adoptions of handicapped children rose from 3 per cent to 6 per cent of all adoptions as a result of both a decrease in average number of non-handicapped adoptions and an increase in the average number of handicapped adoptions.

The private non-sectarian agencies placed the highest proportion of the handicapped children they have in custody. However, they also have the smallest proportion of handicapped children in their custody. They doubled (from 2 to 4 per cent) the proportion of handicapped children placed for adoption by reducing non-handicapped adoptions and increasing handicapped adoptions.

In summary, no particular type of agency appears to be specializing in placing handicapped children for adoption. Ninety per cent or more of the adoptions for each type of agency are of non-handicapped children. The public metropolitan agencies are taking the largest proportion of handicapped children

into custody and the private are taking the smallest. The public metropolitan agencies are unable to match the performance of the other types of agencies in terms of the proportion of handicapped children in custody for which they find homes.

MEASURES OF PLACEMENT OF HANDICAPPED CHILDREN

Four measures of agency success in making adoptive placements for handicapped children are used in the following analysis. They are the number of such placements in 1971; number of such placements in 1972; Difficult to Place Handicap Placement Index (DPHPI); and Handicap Placement Index (HPI). Both questionnaires included a list of eighteen handicaps. The respondent was asked if this handicap was likely to prevent placement of a child, if there were children with that handicap in agency custody, and if the respondent could recall her agency ever having placed a child with that handicap.

The DPHPI is the number of yes answers in the agency questionnaire to the question, "Do you recall your agency placing a child with this handicap", for the eight handicaps rated as most difficult to place by the agencies and workers. The HPI is the number of yes answers for all eighteen handicaps. A score of eight on the DPHPI indicates the agency has placed at least one child with each of the eight most difficult handicaps (mongoloid retardation, cystic fibrosis, cerebral palsy, blind, sickle-cell anemia, severe acting out, deaf, and epilepsy). A score on the HPI of eighteen indicates the agency has placed at least one child with each of the eighteen conditions listed (see questionnaire in Appendix for remaining handicap conditions).

Table 3.6 presents the correlation for each combination of the four measures. The correlation between the number of handicapped children placed in 1971 with the number placed in 1972 indicates that substantial changes took place during that one year. Table 3.1 shows there are more agencies that

Table 3.6

Correlations for Number of Handicapped Children Placed in 1971, in 1972, Difficult to Place Handicap Placement Index, and Handicap Placement Index

	Handicapped Placed 1971	Handicapped Placed 1972	Difficult to Place Handicap Placement Index	Handicap Placement Index
Handicapped Placed 1971	--	.46	.33	.40
Handicapped Placed 1972	--	--	.27	.29
Difficult to Place Handicap Placement Index	--	--	--	.93
Handicap Placement Index	--	--	--	--

increased their placements of handicapped children than agencies that decreased.

The reader needs to remember that the number of agencies upon which the means are based are relatively small and the reporting of number of children placed or type of child placed in some cases is approximate or based upon recall. Patterns should be examined rather than relying on a single indicator.

SPECIALIZATION AND AGENCY PLACEMENT OF THE HANDICAPPED

Agencies differ in how they organize their staff to provide adoption services and in the emphasis they place on finding families for handicapped children. The variability is large. A private sectarian agency refused to cooperate with the project on the grounds that they never have any handicapped children in custody and make no such placements. On the other hand a private non-sectarian agency places only handicapped children for which other agencies have not been able to find families.

Some agencies are designating one or more workers as specialized workers to concentrate on finding families for handicapped children. One-fourth of the agencies in the study indicated they had such a worker. Michigan began a Special Project in 1972 that included one or more specialized workers in each metropolitan county. In every instance the specialized worker is given a caseload of handicapped children for whom to find families, rather than a caseload of prospective adoptive parents to match with children.

Does such specialization make any difference for placing handicapped children? Table 3.7 indicates no matter which of the four measures of handicap placement is used, those agencies with a special project worker have placed more children. Comparing 1972 with 1971, agencies with specialized workers more than doubled their average number of placements from 2.1 to 4.7, whereas

Table 3.7

Mean Number of Handicapped Children Placed in Adoption in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, Mean Handicap Placement Index and Handicap Score by Agency Type and Whether Agency has a Special Project Worker

	Public, Metropolitan	Public, Non-Metropolitan	Private Sectarian	Private, Non-Sectarian	All Agencies
	Have Special Project Worker:				
Handicapped Child Placed 1971	1.1	2.0	7.0	2.7	2.1
Handicapped Child Placed 1972	5.4	1.7	14.0	2	4.7
Difficult to Place Handicap Placement Index	3.1	3.0	3.0	4.0	3.2
Handicap Placement Index	8.7	8.7	11.0	10.7	9.1
Handicap Score	42	39	44	45	42
N	14	3	1	3	21
	Do Not Have Special Project Worker:				
Handicapped Child Placed in 1971	1.1	.4	1.2	.9	.9
Handicapped Child Placed in 1972	1.8	.5	.8	2.1	1.2
Difficult to Place Handicap Placement Index	1.9	.9	.9	3.4	1.6
Handicap Placement Index	7.3	3.8	3.6	10.2	5.9
Handicap Score	39	39	38	45	40
N	16	17	15	10	57

Table 3.7 Continued

Mean Number of Handicapped Children Placed in Adoption in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, Mean Handicap Placement Index and Handicap Score by Agency Type and Whether Agency has a Special Project Worker

	Public, Metropolitan	Public, Non-Metropolitan	Private Sectarian	Private, Non-Sectarian	All Agencies
	All Agencies:				
Handicapped Children Placed 1971	1.1	.6	1.5	1.3	1.1
Handicapped Children Placed 1972	3.5	.7	2.3	2.1	2.2
Difficult to Place Handicap Placement Index	2.5	1.2	1.0	3.5	2.0
Handicap Placement Index	8.1	4.5	4.0	10.3	6.7
Handicap Score	41	39	39	45	41
N	30	20	16	13	79

other agencies increased such placements only from .9 to 1.2 per year. Examining handicap placements by type of agency and whether they have a specialized worker we see the same pattern exists.

Almost two-thirds of all agencies that have specialized workers are public agencies serving metropolitan areas so it is only in this setting that we are able to examine the impact of a special worker in greater detail. There is no difference in average number of handicapped children placed during 1971 for public metropolitan agencies with or without a specialized worker. In fact, those with a specialized worker are below the average for all agencies with specialized workers. Half of these agencies established the specialized worker position during 1972. Of the eleven public metropolitan agencies, six comprised the Michigan Special Project agencies. These six agencies placed on the average 8.3 handicapped children during 1972, compared with 1.8 children for the other public metropolitan agencies with specialized workers in the other states and the same for the public metropolitan agencies without a specialized worker. A private non-sectarian agency in Michigan (Spaulding for Children) that places only children for whom other agencies are unable to find families, placed seventeen handicapped children during 1972. In Alabama, where all matching of families with children takes placed in the State Office, forty-four children with handicaps were placed during the comparable period.

In terms of placements per year, agencies with specialized workers tend to do better than comparable agencies without specialized workers. Furthermore, agencies whose specialized workers are in a project or group environment tend to place substantially more children. This may be due to agency size if only larger agencies have specialized workers and only the largest are involved

in a project environment. If this is the case, larger staffed agencies should place more handicapped children, regardless of whether they have specialized workers or not. Table 3.8 presents data for the mean number of handicapped children placed per worker with a caseload containing children eligible for adoption by type of agency and whether they have a specialized worker. Comparing agencies with specialized workers to those without, one sees that those with specialized workers place from .3 to .5 more handicapped children per worker. Both categories have increased the number of children placed per worker from 1971 to 1972, with those agencies having a specialized worker having the larger increase. The public metropolitan agencies increased .3 of a child per worker from 1971 to 1972. Comparing Michigan Special Project agencies with non-Michigan public metropolitan agencies with specialized workers the number placed per worker for 1972 is .8 and .1, respectively. For the private non-sectarian Michigan agency specializing in hard-to-place children the average was 2.8 per worker and the State Office in Alabama averages 6.3 placements per worker.

With the exception of public metropolitan agencies outside of Michigan with specialized workers, the pattern appears to be that agencies with specialized workers not only place more handicapped children, but they place more per worker. In addition, special projects, specialized agencies, or centralization of all adoptive placements to a small close-knit staff increases the number of handicap placements per worker.

AGENCY ATTITUDES, PROCEDURES, AND PROGRAMS FOR HANDICAPPED CHILDREN PLACEMENTS

Having noted differences in the number of placements and average placements per worker, can we determine how agencies differ in attitudes about placing handicapped children, in procedures, in special programs, and in

Table 3.8
Mean Number of Handicapped Children Placed Per Worker for 1971 and 1972 by Agency Type and Whether Agency has a Special Project Worker

	Public, Metropolitan	Public, Non-Metropolitan	Private, Sectarian	Private, Non-Sectarian	All Agencies
	Have Special Project Worker:				
1971	.1	.7	1.4	.9	.5
1972	.4	.6	2.8	.9	.8
	Do Not Have Special Project Worker:				
1971	.3	.2	.5	.1	.2
1972	.4	.3	.3	.3	.3
	All Agencies:				
1971	.1	.3	.6	.2	.2
1972	.4	.4	.9	.4	.4

characteristics they look for in adoptive applicants for handicapped children? Specifically, do agency administrators differ in their perceptions of the likelihood of handicaps preventing placement? Do agencies have different techniques and levels of commitment to seek families for these children? Are some agencies more likely to participate in special programs or activities that help them find families? Are some agencies looking for adoptive parents with given characteristics while others see different characteristics as important?

Early in the study it became apparent that agency personnel differed in their judgments regarding the suitability and likelihood of finding good adoptive homes for children with different kinds and degrees of handicapping conditions. We assumed that one must be convinced that adoption is the appropriate plan for a child and that a family can be found for the child before much effort is made to find a home for the child. Agency directors were asked to indicate whether they felt a given condition was "very likely to prevent placement", "likely to prevent placement", or "unlikely to prevent placement". Eighteen conditions were presented, ranging from mongoloid retardation to bed wetting. Answers were weighted one for "very likely to prevent", two for "likely to prevent", and three for "unlikely to prevent" placement. The values for each agency director was summed, giving a Handicap Score that ranged from eighteen to fifty-four. A score of eighteen would indicate the agency director thought each condition was very likely to prevent placement, while a score of fifty-four would indicate he felt all of the conditions were unlikely to prevent placement.

Table 3.7 indicates the mean Handicap Score for each type of agency with a specialized worker equals or exceeds the corresponding agencies without

specialized workers. The Handicap Score also has a positive correlation with each of the four measures of handicap placements.

When agencies are categorized by Handicap Score as in Table 3.9 (the lowest score for any agency was actually 20), we see for each of the measures of handicap placement the more likely agency directors are to feel that the eighteen conditions are unlikely to prevent placement, the more placements their agency has made. It appears that believing handicapped children can be placed is related to finding homes for these children. It would also suggest the importance of documenting and providing information to agency directors about the types of placements that are being made by some agencies and attempting to assess the success of these placements and communicate these findings.

Since most agencies are placing more handicapped children than formerly, it is important to know if they are asking applicant couples about adopting a handicapped child, and at what point in the process they do this. Table 3.10 shows the agency responses by agency types. Only 5 per cent said they do not ask this question at all. Most agencies indicate they ask early in the family study. Table 3.11 reveals no particular pattern resulting in more successful placements. Public metropolitan and private non-sectarian agencies indicated they were more likely to ask applicants several times if they were interested in adopting a handicapped child (Table 3.12). There appears to be little difference in the results whether the couples are asked more than once or not (Table 3.13). Over 40 per cent of the agencies have begun asking applicants about adopting a handicapped child during the last five years (Table 3.14). There appears to be little difference among agency types as to when they started

Table 3.9

Mean Number of Handicapped Children Placed in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, and Handicap Placement Index by Handicap Score for Agency Director

	Handicapped Children Placed							
	1971		1972		DPHPI		HPI	
Handicap Score:	$\bar{X}$	N	$\bar{X}$	N	$\bar{X}$	N	$\bar{X}$	N
29 - 36	.6	17	.9	18	1.2	19	4.8	19
37 - 44	1.3	32	2.5	34	1.8	41	6.1	41
45 - 54	1.3	17	2.9	18	3.5	19	9.7	19
Total	1.1	66	2.2	70	2.0	79	6.7	79

Table 3.10

Agency Inquires of Applicants About Adopting a Handicapped Child by Type of Agency

Routinely Ask Applicants	Agency Type				
	Public Metropolitan	Public, Non-Metropolitan	Private Sectarian	Private, Non-Sectarian	All Agencies
Do not ask	7%	5%	6%	--	5%
At first contact	23	20	13	31	21
At group meeting	10	--	6	8	6
Intake, initial screening, first interview	52	55	56	46	53
Several times throughout process	3	10	6	8	6
At any time	3	--	--	--	1
Throughout entire process	3	--	--	8	3
Other	--	10	13	--	5
Total	101%	100%	100%	101%	100%
N	31	20	16	13	80

Table 3.11

Mean Number of Handicapped Children Placed in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, and Handicap Placement Index by If Agency Inquires of Applicants About Adopting a Handicapped Child

	Handicap Children Placed							
	1971		1972		DPHPI		HPI	
Routinely asks Applicants:	$\bar{X}$	N	$\bar{X}$	N	$\bar{X}$	N	$\bar{X}$	N
Do not ask	0.0	3	2.7	4	.8	4	3.3	4
At first contact	1.2	14	3.4	14	3.0	17	8.9	17
At group meeting	1.0	4	3.2	5	1.8	5	4.4	5
Intake, initial screening, first interview	1.2	35	2.1	36	2.0	41	6.7	41
Several times throughout process	1.0	5	.4	5	1.0	5	4.8	5
At any time	—	—	—	—	0.0	1	2.0	1
Throughout entire process	2.0	1	1.5	2	4.5	2	11.5	2
Other	.5	4	.5	4	.8	4	4.3	4
Total	1.1	66	2.2	70	2.0	72	6.7	72

Table 3.12

Does Agency Indicate They Ask More than Once About Adopting a Handicapped Child by Agency Type

Does Agency Indicate They Ask More Than Once	Agency Type				
	Public Metropolitan	Public, Non-Metropolitan	Private Sectarian	Private, Non-Sectarian	All Agencies
Yes	39%	10%	19%	31%	26%
No	61	80	81	69	71
Not ascertained	--	10	—	--	3
Total	100%	100%	100%	100%	100%
N	31	20	16	13	80

Table 3.13

Mean Number of Handicapped Children Placed in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, and Handicap Placement Index by Whether Agency Asks More than Once About Adopting a Handicapped Child

Does Agency Ask More than Once	Handicapped Children Placed				DPHPI		HPI	
	1971		1972					
	$\bar{X}$	N	$\bar{X}$	N	$\bar{X}$	N	$\bar{X}$	N
Yes	1.2	17	1.2	19	2.2	21	7.4	21
No	1.1	47	2.7	50	2.0	56	6.5	56
Total	1.1	64	2.3	69	2.1	77	6.8	77

Table 3.14

When Did Agency Start Asking Applicants About Adopting Handicapped Children by Agency Type

When Started Asking	Agency Type: Public Metropolitan	Public, Non-Metropolitan	Private Sectarian	Private, Non-Sectarian	All Agencies
Within last year	7%	--	--	15%	5%
1-3 years ago	19	20	25	23	21
4-5 years ago	16	15	19	8	15
Longer but not always	13	15	13	8	13
Always	26	15	31	23	24
Other	--	5	--	8	3
Not ascertained	19	30	13	15	20
Total	100%	100%	101%	100%	101%
N	31	20	16	13	80

asking this question. Again no clear pattern emerges when we examine our measures of handicap placement by when an agency started asking applicants about adopting handicapped children (Table 3.15).

The data suggest it does not matter at what point in the adoption process you ask about adopting a handicapped child, or how often you ask a couple, or even how long an agency has been following this practice. Data in Chapter V suggests that asking the question is important as a large number of families come to the agencies seeking a healthy infant but decide to adopt a handicapped child. However, a large number are also initially interested in a handicapped child. We need to examine how agencies recruit or contact these families.

Table 3.16 shows the types of special programs for placing handicapped children in which the agency participates by type of agency. Over one-third of the agencies do not take part in any special programs. This varies substantially by agency type with public non-metropolitan and private sectarian tending to have the least participation in special programs. The most frequently first-mentioned special programs used to recruit adoptive families for handicapped children were newspaper and media programs such as "A Child is Waiting", with a picture and description of an adoptable handicapped child. Twenty-four agencies indicated they participated in two or more special programs for finding families. Table 3.17 reveals agencies using newspaper and other media programs were also the most successful in placing handicapped children for adoption on all four measures of placement. On the other hand, agencies not participating in any special programs tended to make the fewest placements. The data suggest newspapers, TV, local programs, and participation in statewide exchanges tend to be the most successful techniques for finding families.

Agencies were asked if there were any special considerations given to applicants interested in adopting a handicapped child. Table 3.18 indicates

Table 3.15

Mean Number of Handicapped Children Placed in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, and Handicap Placement Index by When the Agency Started Asking Applicants About Adopting a Handicapped Child

When Started Asking:	Handicapped Children Placed 1971 $\bar{X}$	N	1972 $\bar{X}$	N	DPHPI $\bar{X}$	N	HPI $\bar{X}$	N
Within last year	1.5	2	2.0	2	3.8	4	10.8	4
1-3 years ago	.9	14	2.1	15	2.2	17	6.8	17
4-5 years ago	2.0	10	3.6	11	2.3	12	7.7	12
Longer but not always	1.6	7	1.0	7	3.0	9	8.6	9
Always	1.1	18	1.6	18	2.0	19	7.5	19
Other	0.0	2	.5	2	1.5	2	7.0	2
Total	1.3	53	2.3	55	2.3	63	7.7	63

Table 3.16

Agency Participation in Special Programs to Place Handicap Children by Agency Type

Participation In Any Special Programs? First Mentioned	Agency Type: Public, Metropolitan	Public, Non-Metropolitan	Private, Sectarian	Private, Non-Sectarian	All Agencies
No	19%	60%	50%	8%	34%
AREMA	13	—	19	—	9
Appropriate state-wide programs (MARE)	10	15	6	15	11
Newspaper and media programs	23	10	6	23	16
Local programs and presentations	16	5	6	23	12
Special project '72 or '73	6	5	—	—	4
Other	3	5	6	30	9
Not ascertained	10	—	6	—	5
Total	100%	100%	99%	99%	100%
N	31	20	16	13	80

Table 3.17

Mean Number of Handicapped Children Placed in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, and Handicap Placement Index by If There is Agency Participation in Special Programs to Place Handicapped Children (first mentioned)

Participation in any Special Programs (first mentioned):	Handicapped Children Placed 1971 $\bar{X}$	N	1972 $\bar{X}$	N	DPHPI $\bar{X}$	N	HPI $\bar{X}$	N
No	.6	24	1.2	24	.9	26	4.1	26
AREMA	.6	5	1.4	5	1.0	7	4.1	7
Appropriate state-wide programs (MARE)	1.3	8	2.5	8	2.9	9	8.6	9
Newspaper and media programs	2.0	11	5.0	12	3.5	13	11.0	13
Local programs and presentations	1.3	8	2.3	9	2.6	10	9.0	10
Special project '72 or '73	0.0	1	4.0	3	0.0	3	.3	3
Other	1.4	7	.7	7	3.3	7	9.3	7
Total	1.1	64	2.3	68	2.0	75	6.7	75

Table 3.18

Special Considerations Given to Applicants Interested In Adopting a Handicap Child by Agency Type

Special Considerations First Mentioned	Agency Type: Public, Metropolitan	Public, Non-Metropolitan	Private, Sectarian	Private, Non-Sectarian	All Agencies
None	10%	10%	6%	--	7%
Quicker application process	13	--	12	38	14
Subsidy/ elimination of fee (or reduction)	42	40	37	31	39
Special effort in search for child	--	5	--	8	2
Special counselling and help	13	15	25	8	15
More in depth processing	--	5	--	8	2
Other	3	10	12	8	7
Not ascertained	19	15	6	--	12
Total	100%	100%	98%	101%	98%
N	31	20	16	13	80

the variety of special considerations by type of agency. The most frequent type of special consideration mentioned were financial: subsidy, elimination of fee or reduction of fee. Several agencies also give special counseling and help or shorten the application time. The data suggest a subsidy or fee adjustment and/or shortening of the application process leads to greater success in placing handicapped children (Table 3.19).

Agencies were asked what special characteristics they looked for in adoptive parents for handicapped children. Over three-fourths mentioned first they looked for some kind of emotional or psychological capacities, whereas only 2 per cent looked for experience or demonstrated skills in caring for handicapped children (Table 3.20). Data in Chapter V indicate a large number of families who decide to adopt a handicapped child have had special training or experience in caring for the handicapped. Little pattern is observable in the success of placing handicapped children by special characteristics sought, since over three-fourths of the agencies are looking for emotional or psychological characteristics (Table 3.21).

HANDICAPPED CHILDREN IN AGENCY CUSTODY

The critical focus of any study evaluating services should be the recipient population, i.e., the children eligible for adoptive placement. The agency questionnaire asked for brief descriptions of children in agency custody legally eligible for adoption with a mental, emotional, or physical handicap. Each worker was asked for a similar description of the last two handicapped children she had placed in an adoptive home. The State of Michigan Special Project workers were asked to give descriptions of all of the handicapped children they had placed between April, 1972 and June, 1973.

Table 3.19

Mean Number of Handicapped Children Placed in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, and Handicap Placement Index by If Any Special Considerations Given to Applicants Interested in Adopting a Handicapped Child (first mentioned)

Special Considerations (first mentioned)	Handicapped Children Placed				DPHPI		HPI	
	1971		1972					
	$\bar{X}$	N	$\bar{X}$	N	$\bar{X}$	N	$\bar{X}$	N
None	.2	5	2.2	5	.7	6	3.0	6
Quicker application process	2.5	10	4.9	9	4.0	11	11.4	11
Subsidy/elimination of fee (or reduction)	1.1	22	3.0	27	2.4	30	7.4	30
Special effort in search for child	2.0	2	1.0	2	2.0	2	5.0	2
Special counselling and help	.8	10	.8	10	1.3	12	5.8	12
More in depth processing	1.0	2	.5	2	1.5	2	8.5	2
Other	.5	6	0.0	6	1.2	6	3.9	6
Total	1.2	57	2.4	61	2.2	69	7.0	69

Table 3.20

Special Characteristics Looked for in Families Who Adopt A Handicapped Child by Agency Type

Special Characteristics First Mentioned	Agency Type				
	Public, Metropolitan	Public, Non-Metropolitan	Private, Sectarian	Private, Non-Sectarian	All Agencies
None	3%	10%	--	--	4%
Emotional and psychological capacities	77	75	81	77	77
Experience/ skills	3	--	--	8	2
Community resources	--	--	--	--	--
Finances	--	--	--	--	--
Quality of family structure	--	5	19	--	5
Other	13	--	--	15	7
Not ascertained	3	10	--	--	4
Total	99%	100%	100%	100%	99%
N	31	20	16	13	80

Table 3.21

Mean Number of Handicapped Children Placed in 1971 and 1972, Mean Difficult to Place Handicap Placement Index, and Handicap Placement Index by If Any Special Characteristics Looked for in Families Who Adopt a Handicapped Child (first mentioned)

Special Characteristics (first mentioned):	Handicapped Children Placed 1971 $\bar{X}$	N	1972 $\bar{X}$	N	DPHPI $\bar{X}$	N	HPI $\bar{X}$	N
None	.3	3	.7	3	1.0	3	4.3	3
Emotional and psychological capacities	1.2	50	2.4	54	2.0	61	6.8	61
Experience/skills	0.0	1	0.0	1	4.0	2	11.0	2
Community resources	--	--	--	--	--	--	--	--
Finances	--	--	--	--	--	--	--	--
Quality of family structure	1.0	4	.5	4	.8	4	3.0	4
Other	.6	5	3.6	5	2.7	6	7.7	6
Total	1.1	63	2.2	67	2.0	76	6.7	76

The respondents filling out the agency questionnaire reported 382 children with handicaps. The workers described 178 such children that had been placed. An immediate question is the extent to which the children placed differ from those who are waiting to be placed. Tables 3.22 to 3.25 compare these children on the type of handicap they suffer and on the basis of length of time in custody. The data in these tables suggest the mentally retarded child is much more likely to be in custody waiting to be placed. The child with a physical handicap or multiple handicaps (often multiple physical handicaps) is most likely to have been placed. The longer a child is in custody the less likely he is to be adopted. However, a number of children who are retarded and/or who have been in custody for a number of years were placed in adoptive homes by the workers in our sample.

Unfortunately, the descriptions of the children's handicaps provided by the questionnaires were not sufficiently detailed in most cases to allow an accurate assessment of the severity of the handicap. Length of time in custody provides some estimate of the severity of the handicap, at least, insofar as it is likely to prevent placement. These data suggest there is no difference in the sex of the children placed or waiting to be placed in terms of the type of handicap with the possible exception of the mentally retarded where three quarters of the children placed were boys. However, the longer the child has been in custody the more likely boys are to predominate. This tendency is reflected for both children waiting to be placed and those already placed in adoptive homes. Looking at race, black children are more likely to be in the "waiting to be adopted" category regardless of type of handicap or length of time in custody. The mean age of the children waiting to be placed is greater than that of children placed in every category. However, looking at

Table 3.22

Percentage Distribution of Type of Handicap by Whether Placed in Adoptive Home or Perceived as Waiting to be Placed

Type of Handicap:	Unlikely to be Placed	Placed in Adoptive Home
Mentally Retarded	26%	11%
Emotional Problem	20	16
Physical Handicap	25	35
Multiple Handicap	27	38
Not Ascertained	1	--
Total	99%	100%
N	382	178

Table 3.23

Percentage Distribution of Length of Time in Agency Custody by Whether Placed in Adoptive Home or Perceived as Waiting to be Placed

Length of Time in Agency Custody:	Unlikely to be Placed	Placed in Adoptive Home
6 months or less	11%	18%
7 to 18 months	19	30
18 months to 48 months	32	29
More than 4 years	38	18
Not Ascertained	--	4
Total	100%	99%
N	382	178
Mean Time in Custody	4.9 years	2.9 years

Table 3.24

Selected Characteristics of Handicapped Children In Agency Custody who are Waiting Adopted and of Children who were Adopted by Type of Handicap

	Unlikely to be Adopted:				Placed in Adoptive H	
	Mentally Retarded	Emotional Problem	Physical Handicap	Multiple Handicaps	Mentally Retarded	Emotional Problem
Per cent male	60%	60%	54%	63%	74%	66%
Per cent black	24%	18%	32%	31%	11%	10%
Per cent over 5	57%	71%	30%	40%	53%	86%
Per cent over 10	27%	32%	19%	15%	11%	34%
Mean time in custody (in years)	5.9	4.3	4.8	4.8	2.5	3.5
Per cent requiring special facilities outside home	59%	48%	75%	66%	--	--
Per cent where prognosis is other than foster home or adoption	24%	26%	23%	12%	--	--
Mean age at entering custody	4.2	7.2	2.1	3.6	2.9	5.7
N	100	78	97	105	19	29

Table 3.24

aracteristics of Handicapped Children In Agency Custody who are Waiting to be Adopted and of Children who were Adopted by Type of Handicap

Unlikely to be Adopted:				Placed in Adoptive Homes:			
Mentally Retarded	Emotional Problem	Physical Handicap	Multiple Handicaps	Mentally Retarded	Emotional Problem	Physical Handicap	Multiple Handicaps
60%	60%	54%	63%	74%	66%	49%	58%
24%	18%	32%	31%	11%	10%	13%	6%
57%	71%	30%	40%	53%	86%	22%	55%
27%	32%	19%	15%	11%	34%	8%	19%
5.9	4.3	4.8	4.8	2.5	3.5	2.5	3.1
59%	48%	75%	66%	--	--	6%	6%
24%	26%	23%	12%	--	--	--	--
4.2	7.2	2.1	3.6	2.9	5.7	2.4	3.3
100	78	97	105	19	29	63	67

Table 3.25

Selected Characteristics of Handicapped Children In Agency Custody Who are Waiting to
of Handicapped Children Placed for Adoption by Length of Time in Agency Cu

	Unlikely to be Adopted:				Placed in Adoptive Homes:			
	0 - 6 months	7 - 18 months	19-48 months	4 years or more	0 - 6 months	7 - 18 months	19-48 months	4 o
Per cent male	41%	58%	57%	66%	46%	61%	60%	6
Per cent black	17%	26%	21%	25%	6%	6%	18%	
Per cent over 5	31%	30%	41%	65%	18%	41%	54%	8
Per cent over 10	14%	17%	19%	29%	3%	19%	15%	3
Per cent requiring special facilities outside home	59%	44%	63%	71%	3%	6%	6%	
Per cent where prognosis is other than foster home or adoption	9%	10%	15%	31%	--	--	--	-
Mean age on entering custody	5.5	6.1	4.6	3.1	.5	3.8	3.9	2
N	42	72	121	147	33	54	52	3

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Table 3.25

teristics of Handicapped Children In Agency Custody Who are Waiting to be Adopted and Handicapped Children Placed for Adoption by Length of Time in Agency Custody

	Unlikely to be Adopted:				Placed in Adoptive Homes:			
	0 - 6 months	7 - 18 months	19-48 months	4 years or more	0 - 6 months	7 - 18 months	19-48 months	4 years or more
	41%	58%	57%	66%	46%	61%	60%	63%
	17%	26%	21%	25%	6%	6%	18%	9%
	31%	30%	41%	65%	18%	41%	54%	84%
	14%	17%	19%	29%	3%	19%	15%	34%
cial	59%	44%	63%	71%	3%	6%	6%	3%
ls ome	9%	10%	15%	31%	--	--	--	--
	5.5	6.1	4.6	3.1	.5	3.8	3.9	2.2
	42	72	121	147	33	54	52	32

the percentage of children over a given age suggest the mean age masks a skewed distribution and older children are being placed. The children waiting to be placed have already been in custody longer than the children placed and are much more likely to require special facilities available in an educational or medical setting. Only those placed children with a physical handicap or multiple handicaps are likely to need special treatment outside the home, suggesting that the children with emotional problems and those who are mentally retarded that have been placed do not have problems as severe as some of the children who are waiting to be placed. However, about 25 per cent of the children with mental, emotional, or physical handicaps have problems so severe the prognosis is for other than family care.

A comparison of handicapped children waiting to be placed with those adopted indicates the children who are waiting to be placed tend to be somewhat older, have been in custody longer, are more likely to be black, and are more likely to need specialized facilities outside the homes. However, although they differ from children placed on the distribution of these characteristics, some workers are placing children who have these characteristics. The data indicate approximately one-fourth of the children with mental, emotional, or physical handicaps are not likely to be placed in either foster care or adoptive homes. Similarly, almost one-third of those who have been in custody for more than four years are not likely to be placed in foster care or adoptive homes.

SUMMARY

The agencies studied have followed national trends in that most have experienced a decrease in number of adoptive placements. However, this masks a counter trend of a greater number of adoptive placements of handicapped children. Unfortunately most agencies are still placing only a small proportion of these children in their custody. The critical factor in increasing such

placements seems to be the designation of a special worker to concentrate on the placement of special need children. This is especially true when the special worker is part of a larger group that is able to provide her with extra support. The only other agency characteristic that seems to be significant for effective placement of handicapped children is participation in special programs, especially those utilizing the mass media.

This chapter examined differences among agencies that effect their ability to find families for handicapped children. The next chapter explores the characteristics of workers that might affect their ability to place such children and their attitudes toward such placements.

Chapter IV

THE WORKERS

The foregoing analysis of agency type and structure gives us some insight into the variables related to the successful placement of handicapped children, but the data suggest within the same agency not all workers are equally able to make such placements. What are the characteristics that make a worker most successful in placing handicapped children? Are they characteristics that she brings with her to the agency in terms of training and experience or are they a function of the type of work situation she enjoys?

A questionnaire was sent to all of the agency workers whose caseload included children eligible for adoption. The respondents had a variety of types of caseloads ranging from specialists in adoption and specialists in foster care to workers whose responsibilities included AFDC, protective services, and family counseling in addition to both adoption and foster care. Respondents were grouped into four categories: 1) adoption workers who had placed a handicapped child during 1972; 2) adoption workers who had not placed a handicapped child during 1972; 3) other workers (those whose caseloads did not ordinarily include adoption studies or supervision); 4) and supervisors. The workers categorized as "other" are foster care workers. Although they do not do adoption studies they often play a critical role in initiating action to free the child for adoption, in initiating a search for an adoptive home for the child, or in exploring the possibility of adoption with the foster family. The fourth category includes fourteen supervisors who were not the agency person responsible for filling out the agency questionnaire.

CHARACTERISTICS OF THE WORKERS

What are the characteristics of these four categories of workers? Are they similar or different than each other? Table 4.1 through 4.7 provide

Table 4.1

Type of Agency by Workers Type of Caseload and Placement of Handicapped Child

Type of Agency	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-Visors	Total
Public, Metropolitan	57%	54%	58%	29%	55%
Public, Non-Metropolitan	4	—	23	--	11
Private, Sectarian	11	12	7	43	12
Private, Non-Sectarian	28	33	13	29	23
Total	100%	99%	101%	101%	100%
N	46	57	88	14	205

Table 4.2

State In Which Agency is Located by Workers Type of Caseload and Placement of Handicapped Child

State	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-Visors	Total
Alabama	15%	9%	3%	21%	9%
Georgia	4	14	6	14	8
Indiana	11	14	15	7	13
Michigan	54	25	43	14	39
North Carolina	7	25	8	14	13
Ohio	9	14	24	29	18
Total	100%	101%	99%	99%	100%
N	46	57	88	14	205

Table 4.3

Workers' Age by Type of Caseload and Placement of Handicapped Child

Age:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-Visors	Total
28 years old or younger	15%	39%	41%	7%	32
29 to 38 years old	24	30	28	14	27
39 to 48 years old	13	14	7	43	13
49 to 58 years old	26	11	11	7	14
59 years old or older	11	5	11	21	10
Not Ascertained	11	2	1	7	4
Total	100%	101%	99%	99%	100%
N	46	57	88	14	205

Table 4.4

Sex of Worker by Type of Caseload and Placement of Handicapped Child

Worker's Sex:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-Visors	Total
Male	11%	9%	15%	7%	12
Female	89	91	85	93	88
Total	100%	100%	100%	100%	100%
N	46	57	88	14	205

Table 4.5

Workers Education Level by Type of Caseload and Placement of Handicapped Child

Education	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-Visors	Total
Less than BA/BS	4%	2%	6%	--	4%
BA/BS	52	56	64	29	57
MSW	20	33	19	43	25
MA in Sociology or Psychology	7	4	6	14	6
Other	11	4	2	14	5
Not Ascertained	7	2	3	--	3
Total	101%	101%	100%	100%	101%
N	46	57	88	14	205

Table 4.6

Number of Years Worker Has Been in Child Welfare Work by Type of Caseload and Placement of Handicapped Child

Number of Years In Child Welfare	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Less than 2 years	9%	14%	46%	7%
2 to 5 years	26	49	33	14
6 to 8 years	11	18	8	14
9 or more years	48	21	10	63
Not Ascertained	4	--	1	--
Total	98%	102%	98%	98%
N	46	57	88	14
Mean	14.9 yrs.	5.2 yrs.	4.5 yrs.	14.1 yrs.

Table 4.7

Number of Years Worker Has Been With Present Agency by Type of Caseload and Placement of Handicapped Child

Number of Years with Present Agency	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Less than 2 years	4%	16%	32%	14%
2 to 5 years	38	51	53	21
6 to 8 years	15	17	8	35
9 or more years	45	17	5	28
Not Ascertained	--	--	1	--
Total	102%	101%	99%	98%
N	46	57	88	14
Mean	8.5 yrs.	5.3 yrs.	4.3 yrs.	7.6 yrs.

information about the States and types of agencies in which the workers are employed; the composition of the four categories by age and sex; and the educational experiences, length of time in child welfare work, and length of time employed at present agency. Each of these are variables that may make a difference in effectiveness in placing handicapped children. Later in the chapter we will examine each variable for its effect on worker's placement of such children.

Looking at the distribution of workers in terms of the type of agency in which they work (Table 4.1), we see that no particular type of agency has a significantly different number of workers who had placed a handicapped child than would be expected from their proportion in the total sample. Small differences exist for the non-placing adoption workers and the other workers (many are foster care workers) show the smaller extent to which private agencies are involved with foster care work. The fourteen supervisors represent too few cases for consideration. Comparing the four categories of workers on the basis of the state in which the agency is located (Table 4.2), adoption workers who have placed a handicapped child are more likely to work in Michigan than the total sample distribution would suggest. This is most likely a result of the expansion of the sample to include all agencies in Michigan with State Special Project workers. If we had purposively selected agencies in other states that were emphasizing placement of handicapped children, the distribution might change.

Workers who have placed a handicapped child are somewhat older than either adoption workers who have not or other workers (Table 4.3). The data do not indicate any difference in distribution by sex (Table 4.4) or education (Table 4.5) between those workers who have placed a handicapped child and those who

have not. Workers having placed a handicapped child tend to have worked in the child welfare field and with their present agencies for a longer period of time.

ATTITUDES AND INTERACTION PATTERNS OF THE WORKERS

Tables 4.8 through 4.12 reveal the perceived degree of supervision, perceived supervisor's evaluation of work, amount of informal dealings with workers, amount of professional interaction with workers in other agencies within the county, and amount of professional interaction with workers in other counties. Little difference appears in the type of supervision received for the four types of workers (Table 4.8) except that supervisors receive more general supervision. Regarding the worker's perception of her supervisor's evaluation of her (Table 4.9), adoption workers who have placed a handicapped child and supervisors are slightly more inclined to perceive their rating as "one of the best".

Workers who have placed a handicapped child tend to informally interact less frequently with their co-workers in their own agency (Table 4.10) and less often professionally with workers in other agencies in the same county (Table 4.11) than the other types of workers. They tend to interact professionally with workers in other counties more frequently (Table 4.12) than the other types of workers.

Table 4.13 indicates 60 per cent of the adoption workers who have placed a handicapped child placed two or more during 1972. Other workers and supervisors have also made adoptive placements of handicapped children.

WORKER CHARACTERISTICS AND NUMBER OF HANDICAPPED CHILDREN PLACED

Do differences in type of agency for which one works, age, sex, education, length of time with present agency and length of time in child welfare work affect success in finding adoptive homes for handicapped children? It is

Table 4.8

Percentage Distribution of Immediate Supervisors Degree of Supervision by Type of Caseload and Placement of Handicapped Child

Degree of Supervision	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Very general	26%	25%	28%	43%
Fairly general	54	49	42	21
A moderate amount	11	16	18	7
Fairly close	2	11	7	--
Very close	4	--	1	--
Not ascertained	2	--	3	29
Total	99%	101%	99%	100%
N	46	57	88	14

Table 4.9

Percentage Distribution of the Worker's Perception of Her Supervisors' Satisfaction with Her by Type of Caseload and Placement of Handicapped Child

Supervisor's Satisfaction With Worker	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
One of the Best	24%	14%	13%	21%
Above Average	54	53	56	50
About Average	11	30	28	--
Below Average	2	--	--	--
Not Ascertained	9	4	3	29
Total	100%	101%	100%	100%
N	46	57	88	14

Table 4.10

Percentage Distribution of Frequency of Worker's Informal Dealings With Other Workers in the Agency by Type of Caseload and Placement of Handicapped Child

Frequency of Informal Dealings	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Several times a day	54%	67%	61%	64%
2 or 3 times a day	17	25	21	21
A few times a week	22	5	14	--
About once or twice a week	2	2	1	7
Less than once a week	4	2	1	7
Not Ascertained	--	--	2	--
Total	99%	101%	100%	99%
N	46	57	88	14

Table 4.11

Percentage Distribution of Frequency of Workers' Interacting Professionally With Workers at Other Agencies in the Same County by Type of Caseload and Placement of Handicapped Child

Frequency of Interaction	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Several Times a Week	22%	39%	38%	36%
Several Times a Month	37	39	34	43
Several Times a Year	30	19	21	14
Rarely or Never	11	4	7	7
Not Ascertained	--	--	1	--
Total	100%	101%	101%	100%
N	46	57	88	14

Table 4.12

Percentage Distribution of Frequency of Worker's Professional Interaction with Workers at Other Agencies in Other Counties by Type of Caseload and Placement of Handicapped Child

Frequency of Interaction:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Several times a week	15%	5%	3%	14%
Several times a month	41	32	32	29
Several times a year	35	51	43	57
Rarely or never	9	12	21	--
Not ascertained	--	--	1	--
Total	100%	100%	100%	100%
N	46	57	88	14

Table 4.13

Percentage Distribution of Number of Handicapped Children Placed During 1972 by Type of Caseload and Placement of Handicapped Child

Number of Handicapped Children Worker Placed:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-Visors
0	--	100%	83%	71%
1	40	--	14	21
2 or more	60	--	3	7
Total	100%	100%	100%	100%
N	46	57	88	14
Mean	1.6	0	.205	.357

important to examine both the qualitative difference between workers who have placed no handicapped children and those who have placed some and the quantitative difference between workers who placed one child and two or more children. Tables 4.14 through 4.24 examine differences in characteristics among adoption workers in our sample excluding other workers and supervisors.

Little difference exists among the types of agencies with regard to the percentage of adoption workers who have not placed a handicapped child, excepting public non-metropolitan agencies where only two workers are adoption workers (Table 4.14). Public metropolitan agencies, however, have about twice its proportion of workers who have placed two or more handicapped children.

Table 4.15 shows that as the age of the workers increase, so does the percentage of those workers who have placed handicapped children and the percentage of those who have placed more than one handicapped child. Sex of workers appears to have little affect on placement (Table 4.16). Comparing workers on levels of education (Table 4.17), workers with a bachelor's degree are more likely to have placed some children than workers with an M.S.W. Although the other categories of education have too few cases for comparison, they also seem more likely to have placed at least one handicapped child than the worker with a M.S.W. Why should the workers with the most professionalized education be least likely to have placed a handicapped child, but just as likely to have placed two or more such children? Clearly these workers fall into the two extremes. Most of the M.S.W. workers who have placed two or more children are specialized workers. Their role in the agency has been defined to emphasize the placement of special need children. The M.S.W. workers who are not hired for this specific task seem to be unable to place any such children. Although our data do not provide an explanation, unstructured interviews suggest that a professional social work education may place too much

Table 4.14

Number of Handicapped Children Placed During 1972 by Worker's Agency Type For Adoption Workers

Number of Handicapped Children Worker Placed	Worker's Agency Type: Public, Metropolitan	Public, Non-Metropolitan	Private, Sectarian	Private Non-Sectarian	Total
0	56%	—	58%	59%	56%
1	11	—	25	28	18
2 or more	33	100	17	13	26
Total	100%	100%	100%	100%	100%
N	57	2	12	32	103

Table 4.1[illegible]
Number of Handicapped Children Placed During 1972 by Worker's Age
For Adoption Workers

Number of Handicapped Children Worker Placed	Age of Workers: 28 years old or younger	29 to 38 years old	39 to 43 years old	49 to 58 years old	59 years old or older	Not ascertained	Total
0	76%	64%	57%	33%	38%	17%	56%
1	7	7	21	39	25	33	18
2 or more	17	29	21	28	38	50	26
Total	100%	100%	99%	100%	101%	100%	100%
N	29	28	14	18	8	6	103

Table 4.16

Number of Handicapped Children Placed During 1972 by Worker's Sex For Adoption Workers

Number of Handicapped Children Worker Placed	Worker's Sex		
	Male	Female	Total
0	50%	57%	56%
1	20	17	18
2 or more	30	26	26
Total	100%	100%	100%
N	10	93	103

Table 4.17

Number of Handicapped Children Placed During 1972 by Worker's Education For Adoption Workers

Number of Handicapped Children Worker Placed	Worker's Education						
	Less Than BA/BS	BA/BS	MSW	MA in Sociology or Psychology	Other	Not Ascertained	Total
0	33%	57%	71%	40%	29%	25%	56%
1	33	20	4	20	29	50	18
2 or more	33	23	25	40	43	25	26
Total	99%	100%	100%	100%	101%	100%	100%
N	3	56	28	5	7	4	103

Table 4.18

Number of Handicapped Children Placed During 1972 by Length of Time Worked at Present Agency
For Adoption Workers

Number of Handicapped Children Worker Placed	Length of Time Worked at Present Agency: Less than 2 years	2 to 5 years	6 to 8 years	9 or more years	Not ascertained	Total
0	82%	65%	59%	31%	--	56%
1	--	13	24	28	--	18
2 or more	18	22	18	41	--	26
Total	100%	100%	101%	100%	--	100%
N	11	46	17	29	--	103

Table 4.19

Number of Handicapped Children Placed During 1972 by Length of Time Engaged in Child-Welfare Work
For Adoption Workers

Number of Handicapped Children Worker Placed	Length of Time in Child Welfare Work: Less than 2 years	2 to 5 years	6 to 8 years	9 or more years	Not ascertained	Total
0	67%	73%	67%	32%	--	56%
1	8	8	20	29	50	18
2 or more	25	20	13	38	50	26
Total	100%	101%	100%	99%	100%	100%
N	12	40	15	34	2	103

Table 4.20

Number of Handicapped Children Placed During 1972 by Immediate Supervisor's Degree of Supervision For Adoption Workers

Number of Handicapped Children Worker Placed	Degree of Supervision: Very general	Fairly general	A moderate amount	Fairly close	Very close	Not ascertained	Total
0	54%	55%	64%	86%	--	--	56%
1	23	17	21	--	--	--	18
2 or more	23	28	14	14	100	100	26
Total	100%	100%	99%	100%	100%	100%	100%
N	26	53	14	7	2	1	103

Table 4.21

Number of Handicapped Children Placed During 1972 by Worker's Perception of Supervisor's Satisfaction with Her/Him For Adoption Workers

Number of Handicapped Children Worker Placed	Supervisor's Satisfaction with Worker: One of the best	Above Average	About average	Below average	Not ascertained	Total
0	42%	56%	77%	--	33%	56%
1	26	16	14	100	--	18
2 or more	32	27	9	--	67	26
Total	100%	99%	100%	100%	100%	100%
N	19	55	22	1	6	103

Table 4.22

Number of Handicapped Children Placed During 1972 by Frequency of Worker's Informal Dealings with Other Workers in the Agency
For Adoption Workers

Number of Handicapped Children Worker Placed	Frequency of Informal Dealings: Several times a day	2 or 3 times a day	A few times a week	About once or twice a week	Less than once a week	Total
0	60%	68%	23%	50%	33%	56%
1	13	14	46	--	33	18
2 or more	27	18	31	50	33	26
Total	100%	100%	100%	100%	99%	100%
N	63	22	13	2	3	103

Table 4.23

Number of Handicapped Children Placed During 1972 by Frequency of Worker's Professional Interaction with Workers at Other Agencies in the Same County For Adoption Workers

Number of Handicapped Children Worker Placed	Frequency of Interaction: Several times a week	Several times a month	Several times a year	Rarely or never	Total
0	69%	56%	44%	43%	56%
1	9	21	24	14	18
2 or more	22	23	32	43	26
Total	100%	100%	100%	100%	100%
N	32	39	25	7	103

Table 4.24

Number of Handicapped Children Placed During 1972 by Frequency of Worker's Professional Interaction with Workers at Other Agencies in Other Counties For Adoption Workers

Number of Handicapped Children Worker Placed	Frequency of Interaction: Several times a week	Several times a month	Several times a year	Rarely or never	Total
0	30%	49%	64%	73%	56%
1	10	16	13	27	18
2 or more	60	35	18	--	26
Total	100%	100%	100%	100%	100%
N	10	37	45	11	103

emphasis on the worker as therapist. The educational process sensitizes the worker to seeking pathology and defines her roles in terms of treatment. In studying families as potential parents for a handicapped child, these workers may focus on the family's need to seek out a child who is different. She may view these needs as detrimental to good parenting and dissuade the family from adopting.

Repeatedly the description [redacted] of workers who are placing special need children emphasized: 1) these workers refused to judge families but felt that a given family might be able to parent a particular child no matter how unusual that family; 2) the workers felt that the atypical family might actually offer more to a child because of their differences; 3) that they viewed their major task as finding a good home for a child not preventing a placement because the family did not meet ideal standards; and 4) they concentrated on getting the child placed using a wide variety of resources rather than accepting non-placement because traditional techniques did not result in a placement.

The data in Tables 4.18 and 4.19 confirm the previous finding that workers' experience, as measured by both length of time in child welfare and with present agency, is related to the placement of handicapped children. When we look at the characteristics of the work situations (Tables 4.20 to 4.24) we see that those workers who have the most general supervision and those who perceive their supervisor as rating them highly, are most likely to have placed more handicapped children. This may result because placing a handicapped child is seen as doing a good job and because the worker is apt to be more experienced and need less supervision; or it may be that the creative and persistent search for effective ways to find families is most likely to develop under close supervision.

Analyzing the effect of the worker's interaction with other workers, we see that frequent interaction within the agency and within the county seems to have a negative effect in placement, but frequent interaction with workers in other counties has a positive effect. Our data offer no explanation for this phenomena. It needs to be studied in greater detail.

WORKERS' ATTITUDES

Since actual placement of handicapped children varies with the number of such children in agency custody, the size of the agency, and community facilities, the worker's actual placement record may not reflect her potential ability to make such placements. One of the critical dimensions of such potential is the attitude the worker has developed regarding the feasibility of placing children with various kinds of handicaps. Does she believe children with a handicap can be placed? In order to determine whether the individual worker believed children with various kinds of handicaps could be placed, each worker was asked to indicate whether she thought eighteen different handicaps was very likely, likely, or unlikely to prevent placement of a child in her community. The responses to these questions allow some measure of the worker's attitudes toward placing such children, although it is not independent of the worker's experience with her community or her personal experience in placing such children. Table 4.25 shows the distribution of worker's perception of the likelihood of each handicap preventing placement for each category of worker. These data are not consistent but there seems to be a clear tendency for those workers who have placed a handicapped child to feel that given handicaps are unlikely to prevent the placement of a child in an adoptive home.

These responses were computed into a handicap score ranging from 18 to 54. A worker who responded that each of the handicaps would be "very likely to

Table 4.25
Workers Perceptions As to Likelihood of a Particular Handicap Preventing Placement of a Child By Type of Caseload and Placement of a Handicapped Child

Adoption Worker Placed Handicapped Child (45 cases)

Type of Handicap	Very likely to Prevent Placement	Likely to Prevent Placement	Unlikely to Prevent Placement	Total
Severe acting out	16	64	20	100%
Facial Deformity	4	53	42	99%
Orthopedic Problem	7	11	82	100%
Cardiac or Pulmonary Deficiency (correctable)	--	16	84	100%
Mongoloid Retardation	62	31	7	100%
Mild Mental Retardation	7	49	44	100%
Blind	24	60	16	100%
Partially sighted	2	36	62	100%
Deaf	1	47	38	101%
Hyperkinetic	7	44	49	100%
Bed Wetter	--	11	89	100%
Diabetic	4	22	73	99%
Allergies	2	2	96	100%
Asthma	--	11	89	100%
Epilepsy	7	47	47	101%
Sickle-cell Anemia	29	60	11	100%
Cystic Fibrosis	60	33	7	100%
Cerebral Palsy	38	51	11	100%

Table 4.25 Continued

Workers Perceptions As to Likelihood of a Particular Handicap Preventing Placement of a Child By Type of Caseload and Placement of a Handicapped Child

Adoption Worker did not place Handicapped Child (55 cases)

Type of Handicap	Very likely to Prevent Placement	Likely to Prevent Placement	Unlikely to Prevent Placement	Total
Severe acting out	20	66	14	100%
Facial Deformity	21	59	20	100%
Orthopedic Problem	--	25	75	100%
Cardiac or Pulmonary Deficiency (correctable)	7	34	59	100%
Mongoloid Retardation	55	36	9	100%
Mild Mental Retardation	4	66	30	100%
Blind	23	46	30	99%
Partially sighted	4	43	54	101%
Deaf	12	55	32	99%
Hyperkinetic	4	57	39	100%
Bed Wetter	--	23	77	100%
Diabetic	2	29	70	101%
Allergies	--	16	84	100%
Asthma	--	20	80	100%
Epilepsy	7	59	34	100%
Sickle-cell Anemia	20	64	16	100%
Cystic Fibrosis	52	37	11	100%
Cerebral Palsy	45	39	16	100%

Table 4.25 Continued
Workers Perceptions As to Likelihood of a Particular Handicap Preventing Placement of a Child By Type of Caseload and Placement of a Handicapped Child

Supervisors (14 Cases)

Type of Handicap	Very Likely to Prevent Placement	Likely to Prevent Placement	Unlikely to Prevent Placement	Total
Severe acting out	21	57	21	99%
Facial Deformity	21	50	29	100%
Orthopedic Problem	--	29	71	100%
Cardiac or Pulmonary Deficiency (correctable)	7	29	64	100%
Mongoloid Retardation	79	21	--	100%
Mild Mental Retardation	14	43	43	100%
Blind	29	64	7	100%
Partially sighted	--	21	79	100%
Deaf	7	50	43	100%
Hyperkinetic	14	43	43	100%
Bed Wetter	--	21	79	100%
Diabetic	--	43	57	100%
Allergies	--	7	93	100%
Asthma	--	21	79	100%
Epilepsy	36	14	50	100%
Sickle-cell Anemia	36	29	36	101%
Cystic Fibrosis	43	36	21	100%
Cerebral Palsy	29	43	29	101%

Table 4.25 Continued
Workers Perceptions As to Likelihood of a Particular Handicap Preventing Placement of a Child By Type of Caseload and Placement of a Handicapped Child

Other Worker (88 Cases)

Type of Handicap	Very Likely to Prevent Placement	Likely to Prevent Placement	Unlikely to Prevent Placement	Total
Severe acting out	28	59	12	99%
Facial Deformity	11	68	20	99%
Orthopedic Problem	--	34	66	100%
Cardiac or Pulmonary Deficiency (correctable)	3	34	62	99%
Mongoloid Retardation	56	41	3	100%
Mild Mental Retardation	7	60	33	100%
Blind	33	54	12	99%
Partially sighted	4	49	47	100%
Deaf	24	51	25	100%
Hyperkinetic	11	52	37	100%
Bed Wetter	1	19	79	99%
Diabetic	1	35	64	100%
Allergies	1	18	81	100%
Asthma	1	32	67	100%
Epilepsy	17	58	25	100%
Sickle-cell Anemia	23	51	26	100%
Cystic Fibrosis	39	51	10	100%
Cerebral Palsy	37	53	9	99%

prevent placement" of a child received a score of 18 while the worker who responded that each of the handicaps was "unlikely to prevent placement" received a score of 54.

Tables 4.26 through 4.30 presents the median handicap score for various categories of workers. The workers who have placed a handicapped child have the highest median score or are least likely to see the various handicaps as preventing placement. No clear differences emerge when these data are examined for various categories of sex, age, education, or length of experience.

In order to determine the extent to which the worker's attitude is a reflection of her agency's experience with such children, each worker was asked if she could recall her agency having placed such a child. Table 4.31 presents the correlations between perceived likelihood of placing a child with a particular handicap and recall of their having placed such a child. A negative correlation indicates the relationship is in the expected direction (i.e., recall of placement is associated with perception that a handicap is unlikely to prevent placement). The highest correlations in this table are for the less severe handicaps. In other words, all workers recognize a severe handicap is likely to cause difficulties, but those workers who are aware that children with less severe handicaps have been placed are more likely to see the handicap as not preventing placement.

Table 4.32 presents the correlation between worker's perception of the likelihood of placing a child with a particular handicap and whether there is currently such a child in custody. There is no discernible pattern here so that clearly a worker's perception of placing a child with a particular handicap is not due to her experiences with the child but, rather is related to her knowledge a child with a particular handicap has been placed in the past.

Table 4.26

Median Handicap Score by Worker's Sex, Type of Caseload and Placement of Handicapped Child

Worker's Sex:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Male	37	42	41	35
Female	43	40	39	43
N	46	57	88	14
Total	42	40	39	42

Table 4.27

Median Handicap Score by Worker's Education, Type of Caseload and Placement of Handicapped Child

Worker's Education:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Less than BA/BS	37	35	36	--
BA/BS	41	40	40	37
MSW	40	44	40	42
MA in Sociology or Psychology	45	35	35	35
Other	41	36	36	35
Not ascertained	42	36	45	--
N	46	57	88	14
Total	42	40	39	42

Table 4.28

Median Handicap Score by Worker's Age, Type of Caseload and Placement of Handicapped Child

Worker's Age:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-Visors
28 years old or younger	45	42	39	35
29 to 38 years old	40	41	41	35
39 to 48 years old	39	35	35	45
49 to 58 years old	41	40	41	50
59 years old or older	37	46	36	37
Not ascertained	43	39	50	42
N	46	57	88	14
Total	42	40	39	42

Table 4.29

Median Handicap Score by Number of Years with Present Agency, Type of Caseload and Placement of Handicapped Child

Number of Years with Present Agency:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Less than 2 years	35	37	37	35
2 to 5 years	43	41	39	35
6 to 8 years	41	39	41	46
More than 9 years	40	44	37	43
Not ascertained	--	--	50	--
N	46	57	88	14
Total	42	40	39	42

Table 4.30

Median Handicap Score by Number of Years Worker has been in Child Welfare Work, Type of Caseload and Placement of Handicapped Child

Number of Years in Child Welfare Work:	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Supervisors
Less than 2 years	35	37	37	35
2 to 5 years	40	40	41	35
6 to 8 years	44	41	41	46
More than 9 years	47	44	36	43
Not ascertained	36	--	50	--
N	46	57	88	14
Total	42	40	39	42

Table 4.31

Correlations Between Worker's Perception of Ability to Place Child With a Given Handicap and With Her Recollection of Agency Having Placed Such a Child by Type of Caseload and Placement of Handicapped Child

Handicap:	Worker's Recollection of Agency Having Placed Such a Handicap			
	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-visors
Severe acting out	-.30	-.02	-.14	-.32
Facial deformity	-.12	-.30	-.11	-.14
Orthopedic problem	-.31	-.49	-.38	-.41
Cardiac or pulmonary deficiency (correctable)	-.43	-.46	-.45	-.25
Mongoloid retardation	-.25	.08	-.14	-.33
Mild mental retardation	-.24	-.34	-.17	-.66
Blind	-.30	-.22	.01	-.29
Partially sighted	-.34	-.51	-.29	-.46
Deaf	-.19	-.31	-.21	.13
Hyperkinetic	-.30	-.20	-.17	-.33
Bed wetter	-.27	-.56	-.40	-.71
Diabetic	-.37	-.47	-.23	-.35
Allergies	-.50	-.67	-.31	-.54
Asthma	-.34	-.49	-.26	-.26
Epilepsy	-.42	-.32	-.17	-.41
Sickle-cell anemia	-.06	-.02	-.07	-.21
Cystic fibrosis	-.22	-.17	.01	-.10
Cerebral palsy	-.24	-.16	--	-.61

Table 4.32
Correlations Between Worker's Perception of Ability to Place Child With a Given Handicap and Agency's Custody of Child With That Handicap by Type of Caseload and Placement of Handicapped Child

Handicap:	Agency's Custody of Child With Handicap			
	Adoption Worker Placed Handicapped Child	Adoption Worker Did Not Place Handicapped Child	Other Workers	Super-visors
Severe acting out	.16	-.17	.13	.39
Facial deformity	.03	-.08	-.02	.04
Orthopedic problem	-.10	-.19	-.31	-.24
Cardiac or pulmonary deficiency (correctable)	-.20	-.33	-.25	-.06
Mongoloid retardation	.05	.20	.05	.06
Mild mental retardation	-.20	-.27	-.18	-.32
Blind	-.29	-.21	.12	-.11
Partially sighted	-.09	-.47	-.23	-.46
Deaf	-.16	-.28	-.10	.39
Hyperkinetic	-.07	-.15	-.15	.29
Bed wetter	-.25	-.56	-.44	-.48
Diabetic	-.29	-.53	-.14	.04
Allergies	-.41	-.55	-.35	-.62
Asthma	-.33	-.54	-.23	-.08
Epilepsy	-.35	-.37	-.05	-.11
Sickle-cell anemia	.11	.08	-.07	.33
Cystic fibrosis	-.11	-.07	.09	-.26
Cerebral palsy	-.04	-.11	.07	--

SUMMARY

Examination of worker's characteristics as they differ among categories of workers, suggests workers who have placed a handicapped child are likely to have had greater experience in the field of child welfare and have worked at their present agency for a longer time. They have fairly general supervision and feel their supervisors would rate them highly. They have somewhat fewer informal dealings with their co-workers and with workers in other agencies in the same county but are more likely to interact frequently with workers in other counties.

The findings regarding effective placement of handicapped children are: 1) public metropolitan agency workers are more likely to have placed two or more children; 2) as age of worker and experience of worker increases so does the likelihood that she has placed handicapped children; 3) workers with a M.S.W. degree are less likely to have placed than workers with other degrees; 4) more general supervision and perception of doing a good job are related to increased placement; and 5) interaction with workers in other counties leads to increased placements, whereas frequent interaction with workers in one's own agency or in agencies within one's own county does not. The worker's attitudes toward the feasibility of placing children with various handicaps is related to her own experience in placing such children and her knowledge that her agency has been able to place such children.